Rawalpindi Medical University Department of Medical Education (DME)

# Central Nervous System Module





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### **RMU Motto**



## **University Moto, Vision, Values & Goals**

#### **Mission Statement**

To impart evidence-based research-oriented health professional education in order to provide best possible patient care and inculcate the values of mutual respect, ethical practice of healthcare and social accountability.

#### **Vision and Values**

Highly recognized and accredited centre of excellence in Medical Education, using evidence-based training techniques for development of highly competent health professionals, who are lifelong experiential learner and are socially accountable.

### **Goals of the Undergraduate Integrated Modular Curriculum**

The Undergraduate Integrated Learning Program is geared to provide you with quality medical education in an environment designed to:

- Provide thorough grounding in the basic theoretical concepts underpinning the practice of medicine.
- Develop and polish the skills required for providing medical services at all levels of the health care delivery system.
- Help you attain and maintain the highest possible levels of ethical and professional conduct in your future life.
- Kindle a spirit of inquiry and acquisition of knowledge to help you attain personal and professional growth & excellence.

Second Year MBBS 2024

Study Guide

**CNS Module** 

# **Integration of Disciplines in CNS Module**





Subjects	Embryology	Histology	General Anatomy	Gross Anatomy
• Anatomy	<ul> <li>Early CNS Development</li> <li>Spinal Cord</li> <li>Hindbrain &amp; Cerebellum</li> <li>Midbrain</li> <li>Forebrain</li> <li>Peripheral Nervous System</li> </ul>	<ul> <li>Ganglia</li> <li>Peripheral Nerves</li> <li>Spinal Cord</li> <li>Cerebellum</li> <li>Cerebrum</li> </ul>	<ul> <li>General Anatomy of Nervous System</li> <li>General Anatomy of Autonomic Nervous System.</li> </ul>	<ul> <li>Anterior, Middle &amp; Posterior cranial fossae</li> <li>Meninges, Dural venous sinuses, and intracranial hemorrhages</li> <li>Spinal cord &amp; Tracts</li> <li>Brain stem (Medulla oblongata, Pons, cerebellum &amp; Midbrain)</li> <li>Diencephalon</li> <li>Cerebrum</li> <li>CSF and Ventricular System</li> <li>Cranial nerves</li> <li>Basal ganglia</li> <li>Limbic system &amp; Reticular formation</li> <li>Blood Supply of Brain</li> <li>Radiological Imaging of CNS</li> <li>Cross Sectional Anatomy of CNS</li> </ul>
Biochemistry	<ul> <li>Fatty acid metabolism</li> <li>Cholesterol Metabolism</li> <li>Ketone bodies metabolism</li> <li>Lipoproteins and Phospho</li> <li>Fatty Liver and hyper Lip</li> <li>Glycerophospholipid &amp; State</li> </ul>	n lipids idemias. phimgo phospholipid		
• Physiology	<ul> <li>Organization of nervous system, Mechanism of synaptic transmission</li> <li>Classification of sensory receptors, Properties of sensory receptors</li> <li>Properties of synaptic transmission</li> <li>Physiology of pain, Dual pathway for transmission of pain, Analgesia System and Thermal sensations</li> <li>Sensory pathways for transmitting somatic signals</li> <li>Introduction to autonomic nervous system Basic Characteristics of sympathetic &amp; parasympathetic function</li> <li>Somatosensory cortex &amp; lesions of Somatosensory cortex</li> <li>Excitatory &amp; inhibitory effects of sympathetic &amp; parasympathetic stimulation</li> <li>CSF, Blood brain barrier, Blood CSF Barrier, Lumber puncture</li> </ul>			

# **Discipline Wise Details of Modular Contents**

	<ul> <li>Concept of Association areas,</li> <li>Concept of Dominant and non-dominant cerebral hemispheres</li> <li>Limbic system,</li> <li>Functions of hypothalamus</li> <li>Speech and aphasia</li> <li>Learning and memory</li> <li>Reticular activating system and sleep</li> <li>EEG and epilepsy</li> <li>Introduction to motor nervous system &amp; Reflex action, Conditioned reflexes &amp; Properties of reflex action, Control of spinal cord reflexes by higher centers</li> <li>Introduction to cerebellum, Neuronal circuits of cerebellum, and its motor functions</li> </ul>
	Muscle spindle & Golgi tendon organ, Role of muscle spindle and Golgi tendon organ in voluntary motor activity
	Spiral Courses
• The Holy Quran	• Imaniyaat-5
Translation	• Imaniyaat-6
	• Momalat-1
Dala Standing / Lalas int	Miomalat-II
• Pak Studies / Islammiyat	<ul> <li>Musawat</li> <li>Tehrook a Delviston (1040-1047)</li> </ul>
	<ul> <li>Tenreek-e-Pakistan (1940-1947)</li> <li>Whysteen k heleook</li> </ul>
	<ul> <li>Kilwateeli k nakook</li> <li>Oover a Bakisten Ibtidai Muchkilaat</li> </ul>
• Picathias &	<ul> <li>Qayani e rakistan, 1000an Mushkilaan</li> <li>Ethical dilammas in healthears prostice involving broach in principle of systemetry.</li> </ul>
<ul> <li>Bioeunics &amp;</li> <li>Professionalism</li> </ul>	<ul> <li>Ethical dilemmas in healthcare practice involving breach in principle of autonomy</li> <li>Ethical dilemmas in healthcare practice involving breach in principle of heneficence and non-maleficence.</li> </ul>
110105510110115111	<ul> <li>Eulear uneminas in nearlicate practice involving breach in principle of beneficence and non-matericence</li> <li>Ethical dilemmas practice involving breach in principle of justice</li> </ul>
Padiology & Artificial	Skull redicerent
- Raulology & Altificial Intelligence	CT Scan & MRI
Eamily Medicine	Approach to a patient with headache
Behavioral Sciences	Emotions
- Denavioral Sciences	Memory
	Vertical Integration
• Pharmacology	Introduction to CNS
Pathology	Patterns of injury in nervous system
2	• Meningitis
<ul> <li>Dediatrics</li> </ul>	Moningitig

	-		
	Cerebral palsy, Polio		
• Surgery	Spinal injury and head injury		
	Management of hydrocephalus		
Brain abscess			
	Polytrauma patient		
Medicine	Spinal cord and peripheral nervous system		
	• Encephalitis		
	Cerebellar disorders		
	• Epilepsy and other convulsive disorders		
	• Stroke		
Gynecology & Obs	Seizures during pregnancy (eclampsia/ epilepsy)		
	Early Clinical Exposure (ECE)		
Medicine	• Cases of stroke		
	• Paraplegia		
	Vegetative state		
• Surgery/ Neurosurgery	• Head injury.		
	Nerve injuries		
Radiology	• CT scan		
	• Brain		
	• Normal		
	• Stroke		
	• Hemorrhage		
	Infarction Hydrocephalus		
	Brain atrophy		
	Brain Edema		
	Skull/ spine Fractures		
	MRI Brain/ Spine		

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# **CNS Module Team**

:	CNS Module
:	06 Weeks
:	Dr. Arsalan Manzoor Mughal
:	Dr. Gaiti Ara
:	Module Committee
	: : : :

Module Committee			Μ	odule Task Force Team	
1.	Vice Chancellor RMU	Prof. Dr. Muhammad Umar	1.	Coordinator	Dr. Arsalan Manzoor Mughal (Associate Professor of
					Anatomy)
2.	Director DME	Prof. Dr. Ifra Saeed	2.	DME Focal Person	Dr. Farzana Fatima
3.	Chairperson Anatomy & Dean Basic	Prof. Dr. Ayesha Yousaf	3.	Co-coordinator	Dr. Gaiti Aara ((APWMO of Anatomy)
	Sciences				
4.	Chairperson Physiology	Prof. Dr. Samia Sarwar	4.	Co-Coordinator	Dr. Rahat (Senior Demonstrator of Biochemistry)
5.	Chairperson Biochemistry	Dr. Aneela Jamil	5.	Co-coordinator	Dr. Shazia (Senior Demonstrator of Physiology)
6.	Focal Person Anatomy Second Year	Dr. Maria Tasleem			
	MBBS				
7.	Focal Person Physiology	Dr. Sidra Hamid		DM	E Implementation Team
			1.	Director DME	Prof. Dr. Ifra Saeed
8.	Focal Person Biochemistry	Dr. Aneela Jamil	2.	Assistant Director DME	Dr Farzana Fatima
9.	Focal Person Pharmacology	Dr. Zunera Hakim	3.	DME Implementation Team	Prof. Dr. Ifra Saeed
					Dr. Farzana Fatima
					Dr. Saira Aijaz
10.	Focal Person Pathology	Dr. Asiya Niazi	4.	Editor	Muhammad Arslan Aslam
11.	Focal Person Behavioral Sciences	Dr. Saadia Yasir			
12.	Focal Person Community Medicine	Dr. Afifa Kulsoom			
13.	Focal Person Quran Translation	Dr. Uzma Zafar			
	Lectures				
14.	Focal Person Family Medicine	Dr. Sadia Khan			

# **Module IV – CNS Module**

**Rationale:** The human nervous system is the most complex and versatile achievement of the process of evolution. The nervous system of all animals functions to detect changes in the external and internal environment and to bring about appropriate responses in the muscles, organs and glands.

The anatomical, physiological, biochemical and molecular foundation of some of these aspects of neural function are well understood, while others continue to occupy the professional lives of many thousands of researchers in both the basic and clinical sciences.

The nervous system is often damaged by inherited or developmental abnormalities by disease processes and by traumatic injury. The prevention, diagnosis and management of neurological disorders are therefore of immense socioeconomic importance.

This module is expected to build the student's basic knowledge about the normal structure, organization, functions and development of nervous system. This knowledge, skills and attitudes acquired will serve as a fabric on which the student will weave further knowledge about the etiology, pathology and pathogenesis of diseases of nervous system and the principles of their management.

### **Module Outcomes**

By the end of the module, students will be able to:

#### Knowledge

- Describe the development, structure, functions and biochemical processes of the nervous system.
- Briefly describe the injuries and diseases of the nervous system such as Alzheimer's disease, Parkinson's Disease, etc.
- Classify the main drug groups actin on the nervous system.
- Identify the medical conditions related to nervous system such as stroke, cerebellar disorders, meningitis etc.
- Identify the surgical conditions related to the nervous system such as head injury brain tumors and abscesses.
- Identify obstetrical conditions related to nervous system such as preeclampsia.
- Identify pediatric conditions related to nervous system such as meningitis, cerebral palsy and polio.
- Identify parts of the CNS on radiographs CT scans and MRIs.
- Identify ENT and ophthalmological conditions such as acoustic neuroma and strabismus.
- Describe aspects of behavioral sciences such as Emotions and Memory.

- Used technology based Medical Education including Artificial Intelligence.
- Appreciate concept and importance of Biomedical Ethics, & Research.

#### Skills

- Demonstrate dissection and identification of various parts of the nervous system.
- Identify, draw and label histological slides of the nervous system.
- Perform examination of sensory system, motor system, special senses and cranial nerves.
- Demonstrate effective skill for performing estimation of cholesterol, triglycerides and HDL.
- Demonstrate awareness of ethical, legal and social implication of issues related to bioethics

#### Attitude

• Demonstrate professional attitude, team building spirit and good communication specially in small group discussions.

This module will run in 6 weeks duration. Instructional strategies are given in the time table and learning objectives are given in the study guides. Study guides will be uploaded on the university website. Good luck!

### **SECTION - I**

## **Terms & Abbreviations**

#### Contents

- Domains of Learning
- Teaching and Learning

Methodologies/Strategies

- Large Group Interactive Session
   (LGIS)
- Small Group Discussion (SGD)
- Self-Directed Learning (SDL)
- Case Based Learning (CBL)
- Problem- Based Learning (PBL)
- Skill Labs/Practicals (SKL)

#### **Tables & Figures**

• Table1. Domains of learning according to Blooms

Taxonomy

- Figure 1. Prof Umar's Model of Integrated Lecture
- Table2. Standardization of teaching content in Small

**Group Discussions** 

- Table 3. Steps of taking Small Group Discussions
- Figure 2. PBL 7 Jumps Model

# **Table1. Domains of Learning According to Blooms Taxonomy**

Sr. #	Abbreviation	Domains of learning
1.	C	Cognitive Domain: knowledge and mental skills.
	• C1	Remembering
	• C2	Understanding
	• C3	Applying
	• C4	Analyzing
	• C5	Evaluating
	• C6	Creating
2.	Р	Psychomotor Domain: motor skills.
	• P1	Imitation
	• P2	Manipulation
	• P3	Precision
	• P4	Articulation
	• P5	Naturalization
3.	А	Affective Domain: feelings, values, dispositions, attitudes, etc
	• A1	Receive
	• A2	Respond
	• A3	Value
	• A4	Organize
	• A5	Internalize

## **Teaching and Learning Methodologies / Strategies**

### Large Group Interactive Session (LGIS)

The large group interactive session is structured format of Prof Umar Model of Integrated lecture. It will the followed for delivery of all LGIS. The lecturer will introduce a topic or common clinical condition and explains the underlying phenomena through questions, pictures, videos of patients, interviews, and exercises, etc. Students are actively involved in the learning process.



Figure 1. Prof Umar's Model of Integrated Lecture

# **Small Group Discussion (SGD)**

This format helps students to clarify concepts acquire skills and attitudes. Sessions are structured with the help of specific exercises such as patient case, interviews or discussion topics or power point presentations. Students exchange opinions and apply knowledge gained from lectures, SGDs and self study. The facilitator role is to ask probing questions, summarize and help to clarify the concepts.

### Table 2. Standardization of teaching content in Small Group Discussions

S. No	Topics	Approximate %
1	Title Of SGD	
2	Learning Objectives from Study Guides	
3	Horizontal Integration	5%+5%=10%
4	Core Concepts of the topic	60%
5	Vertical Integration	20%
6	Related Advance Research points	3%
7	Related Ethical points	2%

# Table 3. Steps of Implementation of Small Group Discussions

Step 1	Sharing of Learning objectives by using students Study guides	First 5 minutes
Step 2	Step 2Asking students pre-planned questions from previous teaching session to develop co-relation (these questions will be standardized)	
Step 3	Students divided into groups of three and allocation of learning objectives	5minutes
Step 4	ACTIVITY: Students will discuss the learning objectives among themselves	15 minutes
Step 5	Each group of students will present its learning objectives	20 min
Step 6	Discussion of learning content in the main group	30min
Step 7	Clarification of concept by the facilitator by asking structured questions from learning content	15 min
Step 8	Questions on core concepts	
Step 9	Questions on horizontal integration	
Step 10	Questions on vertical integration	
Step 11	Questions on related research article	
Step 12	Questions on related ethics content	
Step 13	Students Assessment on online MS teams (5 MCQs)	5 min
Step 14	Summarization of main points by the facilitator	5 min
Step 15	Students feedback on the SGD and entry into log book	5 min
Step 16	Ending remarks	

## **Self-Directed Learning (SDL)**

- Self- directed learning is a process where students take primary charge of planning, continuing, and evaluating their learning experiences.
- Time Home assignment
- Learning objectives will be defined
- Learning resources will be given to students = Textbook (page no), web site
- Assessment:
  - i Will be online on LMS (Mid module/ end of Module)

ii.OSPE station

# **Case Based Learning (CBL)**

- It's a learner centered model which engages students in discussion of specific scenarios that typically resemble real world examples.
- Case scenario will be given to the students
- Will engage students in discussion of specific scenarios that resemble or typically are real-world examples.
- Learning objectives will be given to the students and will be based on
  - i. To provide students with a relevant opportunity to see theory in practice
  - ii. Require students to analyze data in order to reach a conclusion.
- iii. Develop analytic, communicative, and collaborative skills along with content knowledge.

# **Problem Based Learning (PBL)**

- Problem-based learning (PBL) is a student-centered approach in which students learn about a subject by working in groups to solve an open-ended problem.
- This problem is what drives the motivation and the learning.

The 7- Jun				
Step 7	Step 7 Synthesie & Report			
Step 6	Collect Information from outside	Session - II		
Step 5	Step 5         Generate learning Issues			
Step 4	Step 4Discuss and Organise Ideas			
Step 3	on			
Step 2	essi			
Step 1	Š			
Problem- Scenario				

Figure 2. PBL 7 Jumps Model

# Practical Sessions/Skill Lab (SKL)

Practical Session/ Skill Lab (SKL)			
Demonstration/ power point presentation 4-5 slide	10-15 minutes		
Practical work	25-30 minutes		
Write/ draw and get it checked by teacher	20-25 minutes		
05 mcqs at the end of the practical	10 minutes		
At the end of module practical copy will be signed by head of department			
At the end of block the practical copy will be signed by			
Head of Department			
Dean			
Medical education department			
QEC			

## **SECTION – II**

# Learning Objectives, Teaching Strategies & Assessments

#### Contents

- Horizontally Integrated Basic Sciences (Anatomy, Physiology & Biochemistry)
- Large Group Interactive Session:
  - Anatomy (LGIS)
  - Physiology (LGIS)
  - Biochemistry (LGIS)
- Small Group Discussions
  - Anatomy (SGD)
  - Physiology (SGD)
  - Biochemistry (SGD)
- Self-Directed Topic, Learning Objectives & References
  - Anatomy (SDL)
  - Physiology (SDL)
  - Biochemistry (SDL)
- Skill Laboratory
  - Anatomy
  - Physiology
  - Biochemistry

# Horizontally Integrated Basic Sciences (Anatomy, Physiology & Biochemistry)

Anatomy Large Group Interactive Session (LGIS)

Topic	At The End Of The Session Student Should Be Able To	C/P/A	Teaching	Assessment	
	• Discuss the major divisions of nervous system	$C^{2}$	Strategy	1001	
	Discuss the higher divisions of hervous system     Differentiate between neurons and neuroglie	$C_2$			
	• List the neuroglia and their functions	$C_2$	-		
	Describe myslingtion of nerve fibers	C1			
General Anatomy	Describe inventation of nerve fibers	C2 C2		MCQs	
Nervous System	• Describe the structure of a peripheral nerve and reflex action	$C_2$	LGIS	SAQs	
	• Describe degeneration and regeneration of nerves	C2		SEQs	
	• Correlate with the clinical conditions & cross sections.	C3		VIVA	
	• Understand curative and preventive health care measures.	C3			
	• Practice the principles of bioethics.	C3	-		
	• Apply strategic use of A.I in health care.	C3			
	• Read relevant research article.	C3			
	• Describe the process of development of neurocranium and viscerocranium	C2		MCQs	
	• Describe formation of neural tube, neuropores and their closure	C2			
	• Describe histogenesis and Cytodifferentiation within the neural tube.	C2			
Embryology	• Describe the brain flexures and their derivatives	C2	I CIG		
Early development of	• Describe role of neuroblasts forming efferent and afferent rows.	C2	LGIS	SAQS	
Norvous System	• Correlate with the clinical conditions & cross sections.	C3		SEQS VIVA	
Nervous System	• Understand curative and preventive health care measures.	C3		VIVA	
	• Practice the principles of bioethics.	C3			
	• Apply strategic use of A.I in health care.		1		
	Read relevant research article.	C3			
Embryology	• Describe the significance of ventricular, mantle and marginal layers of developing spinal cord.	C2	LGIS	MCQs SAQs	

Development of spinal	• Enumerate derivatives of alar and basal plates in developing spinal cord.	C1		SEQs		
cord	• Describe the process of myelination of nerve fibers.	C2		VIVA		
	• Describe role of neural crest cells in development of spinal ganglia.	C2				
	• Explain positional changes of spinal cord.					
	C3					
	• Correlate with the clinical conditions & cross sections.	C3				
	• Understand curative and preventive health care measures.	C3				
	• Practice the principles of bioethics.	C3				
	• Apply strategic use of A.I in health care.	C3				
	• Read relevant research article.	C3				
	• Enlist the components of peripheral and autonomic system.	C1				
	• Tabulate differences between sympathetic and parasympathetic nervous systems	C2		MCOs		
General Anatomy	• Describe effects of sympathetic and parasympathetic nervous systems on various	C2				
Autonomic Nervous	parts of the body	62	LGIS	SAOs		
System	• Discuss the anatomical basis of autonomic injuries such as Horner's syndrome,	C3	2016	SEQS		
j e c	Drinary bladder dysfunction, rectal distention, Erectile dysfunction are argyli Robertson pupil			VIVA		
	<ul> <li>Correlate with the clinical conditions &amp; cross sections</li> </ul>					
	<ul> <li>Understand curative and preventive health care measures</li> </ul>	C3	-			
	<ul> <li>Practice the principles of bioethics</li> </ul>	C3				
	<ul> <li>Apply strategic use of A I in health care</li> </ul>	C3				
	Read relevant research article	C3				
	<ul> <li>Describe the histological structure of meninges and choroid plexus</li> </ul>	C2				
	<ul> <li>Discuss the histological structure of Mvelinated and unmvelinated nerve fibers</li> </ul>	C2				
Histology	Discuss the histological structure of sensory and autonomic ganglia	C2		MCQs		
Meninges, Choroid	Discuss the principles of neuroplasticity and regeneration	C2	LGIS	SAQs		
Plexus, Peripheral	• Correlate with the clinical conditions & cross sections.	C3		SEQs		
Nervous system and ganglia	• Understand curative and preventive health care measures.	C3		VIVA		
	Practice the principles of bioethics.	C3				
	• Apply strategic use of A.I in health care.	C3				
	Read relevant research article.	C3				
Embryology	Describe the development of Myelencephalon.	C2	LGIS	MCQs		
	Describe the arrangement of neuroblasts in metencephalon	C2		SAQs		

Development of	• Describe the development of metencephalon.	C2		SEQs			
Rhombencephalon	• Describe the arrangement of neuroblasts in metencephalon	C2		VIVA			
	Describe the development of cerebellum	C2					
	• Correlate with the clinical conditions & cross sections.	C3					
	• Understand curative and preventive health care measures.	C3					
	<ul> <li>Practice the principles of bioethics.</li> <li>Apply strategic use of A.I in health care.</li> </ul>						
	Read relevant research article.	C3					
	Describe the histological structure of spinal cord	C2					
	Describe the histological structure of cerebellum	C2		MCQs			
Histology	• Discuss cells in each layer along with its histological morphology	C2	LGIS	SAQs			
Spinal Cord and	• Correlate with the clinical conditions & cross sections.	C3		SEQs			
Cerebellum	Understand curative and preventive health care measures.	C3		VIVA			
	Practice the principles of bioethics.	C3					
	Apply strategic use of A.I in health care.	C3					
	Read relevant research article.	C3					
	Describe the development of mesencephalon	C2					
	Describe the arrangement of neuroblasts in mesencephalon	C2					
	Describe the development of mesencephalon	C2					
Embruology	Describe the arrangement of neuroblasts in mesencephalon	C2		MCO			
Development	Describe the development of pituitary gland	C2	LGIS	MCQs SAOs			
Mesencephalon and	• Discuss the anatomical basis of pharyngeal hypophysis and craniopharyngiomas	C3	LOID	SEQS			
Prosencephalon	• Discuss the anatomical basis of birth defects such as encephalocele,	C3		VIVA			
1	microencephaly, microcephaly, Chiari malformation.						
	Correlate with the clinical conditions & cross sections.	C3					
	Understand curative and preventive health care measures.	C3					
	Practice the principles of bioethics.	C3					
	Apply strategic use of A.I in health care.	C3					
	Read relevant research article.	C3					
	Describe the histological structure of cerebrum	C2					
Histology	Correlate with the clinical conditions & cross sections.	C3	LGIS	MCQs			
Cerebrum	Understand curative and preventive health care measures.	C3		SAQs			
	Practice the principles of bioethics.	C3		SEQs			

	• Apply strategic use of A.I in health care.	C3		VIVA
	Read relevant research article.	C3		
	Describe the development cranial nerves	C2		
	Describe the development of spinal nerves	C2		
Embryology	• Describe the development of sympathetic nervous system	C2	1.010	MCQs
Development of	Describe the development of parasympathetic nervous system	C2	LGIS	SAQs
peripheral and	Correlate with the clinical conditions	C3		SEQS
autonomic nervous	• Understand curative and preventive health care measures.	C3		VIVA
system	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Describe the development of different steps of cartilaginous and membranous	C2		
Embryology	viscero cranium and neuro-cranium.			
Development of	• Discuss the postnatal growth of the cranium	C2		MCQs
Cranium	Correlate with the clinical conditions.	C3	LGIS	SAQs
	• Understand curative and preventive health care measures.	C3		SEQs
	Practice the principles of bioethics.	C3		VIVA
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		

# **Physiology Large Group Interactive Session (LGIS)**

Topic	At The End Of This LGIS, Second Year MBBS Students Should Be Able To:	Learning Objectives	Teaching Strategy	Assessment Tools	References	Learning Resources
	Describe the general organization of nervous system     Describe major levels of CNS functions	C1	LCIS	MCO	Ganong's Review of Medical	
Organization of Nervous System	<ul> <li>Describe major revers of CNS functions</li> <li>Briefly explain nerve fiber structure, classification &amp; properties</li> </ul>	C2	LOIS	SEQ VIVA	Central and Peripheral Neurophysiology Section 02	• <u>https://youtu.be/</u> <u>432AD7JZnKE</u>
Mechanism of synaptic	Describe labeled line principle	C1			(Chapter 08, Page 168)	<u>nttps://www.osmosi</u>
transmission	Define synapse	C1			<ul> <li>Physiology by Linda S.</li> </ul>	ensory nathways
	<ul> <li>Enumerate &amp; compare types of synapses</li> </ul>	C2			Costanzo 6th Edition.	<u>ensory_patriways</u>
	<ul> <li>Describe process of synaptic transmission</li> </ul>	C1			Neurophysiology (Chapter 03.	

	• Enumerate the important neurotransmitters of nervous system	C1			Page 82) Textbook of Medical Physiology by Guyton & Hall.14th Edition. Section 09.(Chapter 48, Page 601,609)	
Classification of sensory receptors	<ul> <li>Enumerate &amp; explain different types of sensory receptors according to function</li> <li>Enumerate &amp; explain different types of sensory receptors according to location</li> <li>Enlist various properties of sensory receptors</li> </ul>	C1 C2	LGIS	MCQ	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Central and Peripheral Neurophysiology Section 02 (Chapter 08, Page 168)</li> <li>Physiology by Linda S. Costanzo 6th Edition.</li> </ul>	• https://youtu.be/
Properties of sensory receptors	<ul> <li>Describe mechanism of signal transduction &amp; generation of receptor potential</li> </ul>	C1 C1		VIVA		432AD7JZnKE https://www.osmosi
	<ul> <li>Describe mechanism of adaptation of different types of receptors</li> <li>Describe the properties of sensory receptors</li> </ul>	C1 C1			Page 82) Textbook of Medical Physiology	ensory_pathways
	• Describe the types and characteristics of tactile receptors	C1			by Guyton & Hall.14th Edition. Section 09.(Chapter 48, Page 601,609)	
Properties of synaptic	• Briefly explain the electrical events during neuronal excitation and inhibition	C2	LGIS	MCQ	Ganong's Review of Medical     Physiology.25TH Edition.	
transmission	Explain temporal and spatial summation	C1	SEQ		Central and Peripheral	
	• Enlist & explain various characteristics of synaptic transmission	C1		VIVA	<ul> <li>Neurophysiology Section 02 (Chapter 08, Page 168)</li> <li>Physiology by Linda S. Costanzo 6th Edition. Neurophysiology (Chapter 03. Page 82)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 48, Page 601,609)</li> </ul>	• <u>https://youtu.be/</u> <u>432AD7JZnKE</u> <u>https://www.osmosi</u> <u>s.org/learn/Somatos</u> <u>ensory_pathways</u>
	Define pain	C1				
Physiology of pain	Enumerate different types of pain	C2	4			
Dual pathway for	Tabulate the differences between two types of pain	$\frac{Cl}{C1}$	LCIS	MCO		
Analgeia System	Describe characteristics of pain receptors     Discuss the mechanism of stimulation of pain	$\frac{C1}{C2}$		SEO		
	• Discuss the incentation of sumulation of pain	C2	1	~-~~		

	receptors			VIVA		
	<ul> <li>Compare and contrast neospinothalamic &amp; paleo spinothalamic tract</li> </ul>	C2				
Thermal Sensations	Define referred pain	C1				
	• Explain the mechanism of referred pain	C2				
	• Give examples of referred pain	C1				
	• Describe visceral pain and its causes	C1				
	Define headache	C1				
	• Enlist the types of headache & their causes	C1				
	• Explain the analgesia system	C2				
	Describe thermal receptors	C1				
	• Explain mechanism of excitation of thermal receptors	C2				
	• Describe transmission of thermal signals in nervous system	C1				
	Classify somatic senses	C2			Ganong's Review of Medical	https://youtu.be/
	• Describe the sensory pathways for	C1			Physiology.25TH Edition.	432AD7JZnKE
Sensory pathways for	transmission of somatic sensations to central			MCQ	Central and Peripheral	https://www.osmosi
transmitting somatic	nervous system		LGIS	SEQ	Neurophysiology Section 02	s.org/learn/Somatos
signals	• Enumerate sensations carried by dorsal column system and anterolateral system	C1		VIVA	<ul><li>(Chapter 08, Page 168)</li><li>Physiology by Linda S.</li></ul>	ensory_pathways
	• Describe the characteristics of transmission in the dorsal column medial lemniscal system and anterolateral system	C1			Costanzo 6th Edition. Neurophysiology (Chapter 03. Page 82)	
	Compare and contrast dorsal column medial lemniscal system and anterolateral system	C2			Textbook of Medical Physiology by Guyton & Hall.14th Edition. Section 09.(Chapter 48, Page 601,609)	
	Describe general organization of autonomic nervous     system	C1			Ganong's Review of Medical     Physiology 25TH Edition	• <u>https://www.ken</u> hub.com/en/libra
Introduction to autonomic	• Enumerate the functions of autonomic nervous	C1	-	MCO	(Chapter 13, Page 255.259)	rv/anatomv/auto
nervous system	system	01	LGIS	SEO	• Physiology by Linda S.	nomic-nervous-
Basic Characteristics of	• Describe sympathetic and parasympathetic nervous	C1	1	VIVÀ	Costanzo 6th Edition.	system
sympathetic &	system				Autonomic Nervous	https://youtu.be/j9p
parasympathetic function	• Enumerate & explain their receptors,	C1			System(Chapter 02. Page 47,59)	UltHAAhs
	neurotransmitters & physiological effects				Human Physiology by Dee	https://youtu

	Describe physiological anatomy & effects of adrenal	C1			Unglaub Silver thorn. 8TH	<u>.be/7pGKa-1tSJw</u>
	medulla				Edition. The Central Nervous	https://youtu.be/gB
					System (Chapter 11 Page 392)	<u>OAYgMxq-Q</u>
					Textbook of Medical Physiology	
					by Guyton & Hall.14th Edition.	
					Section 09.(Chapter 61, Page	
					763,765)	
Somatosensory cortex &	Explain cortical mapping & association cortex	C2			<ul> <li>Textbook of Medical</li> </ul>	https://teachmeanat
lesions of somatosensory	• Describe lesions of somatosensory areas	C1		MCQ	Physiology by Guyton &	omy.info/neuroanat
cortex	Summarize role of thalamus in somatic sensations	C1	LGIS	SEQ	Hall.14th Edition.(Chapter	omy/pathways/asce
	• Interpret the importance of dermatomes	C3		VIVA	48,Page 603)	nding-tracts-
					https://nba.uth.tmc.edu/neuroscien	sensory/
Excitatory & inhibitory	Briefly explain physiological actions of ANS	C2			Ganong's Review of Medical	• https://voutu.be/
effects of sympathetic &	vasomotor tone, vagal tone & sympathetic stress	02		MCO	Physiology.25TH Edition.	7pGKa-1tSJw
parasympathetic	response		LGIS	SEQ	(Chapter 13, Page 264)	• https://www.ken
stimulation	• Draw a table showing autonomic effects on various	C1		VIVA	• Physiology by Linda S.	hub.com/en/libra
	body organs	01			Costanzo 6th Edition.	rv/anatomv/auto
	Briefly describe the pharmacology of autonomic	C1			Autonomic Nervous	nomic-nervous-
	nervous system	01			• System(Chapter 02. Page 55)	system
					• Human Physiology by Dee	https://www.diffen.
					Unglaub Silver thorn. 8TH	com/difference/Par
					Edition. The Central Nervous	asympathetic_nervo
					System (Chapter 11 Page 397)	us_system_vs_Sym
					Textbook of Medical Physiology	pathetic_nervous_s
					by Guyton & Hall.14th Edition.	ystem
					Section 09.(Chapter 61, Page 768)	-
	Describe briefly the physiological anatomy of	C1			• Physiology by Linda S.	• https://youtu.be/f
	cerebral blood flow			MCQ	Costanzo 6th Edition.	9xi1Rf5m9w
CSF, Blood Brain Barrier,	<ul> <li>Explain cerebrospinal fluid system</li> </ul>	C2		SEQ	Neurophysiology (Chapter 03.	https://www.scienc
Blood CSF Barrier,	• Describe the CSF pressure, its	C1	LGIS	VIVA	Page 113)	edirect.com/topics/
Lumber Puncture	measurement by lumbar puncture, &				Textbook of Medical Physiology	neuroscience/blood
	hydrocephalus				by Guyton & Hall.14th Edition.	-cerebrospinal-
	Explain blood CSF barrier & BBB	C2			Section 09.(Chapter 62, Page 777-	fluid-barrier
	Describe brain edema	C1			784)	

	- Draw association areas of brain	<u>C1</u>				https://my.alayalan
	Draw association areas of brain regarding their	$\frac{CI}{C1}$	_		Teytbook of Medical	delinic org/health/a
Concept of Association	• Describe association areas of brain regarding then physiological role	CI		MCO	Physiology by Guyton &	rticles/23073-
areas, dominant and non-	• Explain briefly the clinical features if the	C2	LGIS	SEO	Hall 14th Edition	cerebral-cortex
dominant cerebral	association areas become damaged	02	2015	VIVA	Section 09.(Chapter 58, Page 727)	https://voutu.be/2Z
hemispheres	Describe concept of dominant hemisphere	C1				425-CHY1c
1	• Enlist role of parieto-occipito temporal cortex in	C1				
	non-dominant hemisphere					
	Describe the concept of limbic system	C1			Textbook of Medical Physiology	• https://youtu.be/
	Describe physiological anatomy of limbic system	C1			by Guyton & Hall.14th Edition	h3K9RfGw8sI
	• Enumerate and explain the roles of hippocampus,	C1				https://www.endocr
Limbic system	amygdala and limbic cortex			MCQ SEQ VIVA		ineweb.com/endocr
Functions of hypothalamus	Describe physiological anatomy of hypothalamus	C1	LGIS			inology/overview-
	Enlist functions of hypothalamus	C1				hypothalamus
	• Explain role of hypothalamus in:	C2				
	• Vegetative function					
	• Endocrine function Behavioral function					
	• Reward and punishment function					
	• Describe sensory and motor aspects of	C1			• Ganong's Review of Medical	• https://www.scie
	communication	<u></u>	L CIC	MCQ SEQ VIVA	Physiology.25TH Edition.	ncedirect.com/sc
Speech and aphasia	• Define Wernicke's aphasia, Motor aphasia & Global	CI	LGIS		(Chapter 15, Page 290,293)	ience/article/abs/
	apnasia Evelsie Werniske's enhagie Meter enhagie &	<u>C</u> 2	_		Physiological Basis of Medical Prostice by Post & Taylor's 12th	p11/S0021992422
	• Explain wernicke's apnasia, Motor apnasia &	C2			Edition (Chapter 70, Page 1211)	https://www.stroke
	• Describe function of corpus callosum & anterior	<u>C1</u>	_		Edition. (Chapter 70, 1 age 1211)	org uk/what-is-
	• Describe function of corpus canosum & anterior commissure in transferring information between	CI				aphasia/types-of-
	two cerebral hemispheres					aphasia
	Define memory & classify its various types	C1			Ganong's Review of Medical	• https://voutu.be/
	Describe role of synaptic inhibition and synaptic	C1		MCQ	Physiology.25TH Edition.	EqdsQDM5Fys
Learning and memory	facilitation in memory		LGIS	SEQ	Section 02 (Chapter 15, Page	https://www.scienc
	• Explain mechanism of short term, intermediate	C2		VIVA	283)	edirect.com/topics/
	and long-term memory				• Physiology by Linda S.	psychology/learnin
	Describe mechanism of consolidation of memory	C1			Costanzo 6th Edition.(Chapter	g-and-memory
	• Enumerate specific parts of brain involved in	C2			03. Page 112)	
	memory				Human Physiology by Dee	

	• Explain the role of each part	C2			Unglaub Silver thorn. 8TH	
					Edition. The Central Nervous	
					System (Chapter 09 Page 332)	
					Textbook of Medical Physiology	
					by Guyton & Hall.14th Edition.	
					Section 09.(Chapter 58, Page 735)	
	• Describe activating driving system of the brain	C1			<ul> <li>Ganong's Review of Medical</li> </ul>	<ul> <li>https://youtu.be/</li> </ul>
	• Explain the reticular activating system	C2			Physiology.25TH Edition.	TdGQvWAZ0Cs
	• Discuss the control of cerebral activity by	C2		MCQ SEQ	Section 02 (Chapter 14, Page	https://www.physio
Reticular activating system	signals from brain stem		LGIS		269,272,278)	-
and sleep	• Explain neurohormonal system of the brain	C2		VIVA	<ul> <li>Human Physiology by Dee</li> </ul>	pedia.com/Reticula
	• Define sleep and enumerate types of sleep	C1			Unglaub Silver thorn. 8TH	r Formation
	• Compare and contrast between two types of sleep	C2			Edition.Sensory Physiology	
	• Describe the basic theories of sleep in detail	C1			(Chapter 10 Page 344)	
	• Explain physiological effects of sleep	C2			Physiological Basis of Medical	
	Describe sleep and wakefulness cycle	C1			Practice by Best &	
					Taylor's.13th Edition. (Chapter	
					70, Page 12031208)	
					Textbook of Medical Physiology	
					by Guyton & Hall.14th Edition.	
					Section 09.(Chapter 60, Page 753)	
	Describe brain waves	<u>C1</u>	_		• Ganong's Review of Medical	https://www.webm
	• Enumerate different types of brain wave	C2			Physiology.25TH Edition.	d.com/epilepsy/gui
	• Explain the origin of different brain waves	C2	_		Section 02 (Chapter 14, Page	de/types-epilepsy
	Describe EEG	C1	_		275)	https://youtu.be/17
	Define epilepsy	C1			• Physiology by Linda S.	MKIPY1L48
EEG and epilepsy	Enumerate various types of epilepsy	C1	I GIG	MCQ	Costanzo 6th Edition.(Chapter	
	Explain various types of epilepsy	C2	LGIS	SEQ	$03. \operatorname{Page} 42)$	
	• Describe role of nor-epinephrine, serotonin and	C1		VIVA	• Physiological Basis of Medical	
	dopamine in psychotic disorders	C1			Taxler's 12th Edition (Chapter	
	• Describe the causes, symptoms & treatment of	C1			Taylor S.13th Edition. (Chapter	
	depression & bipolar disorder				70, Page 1209)	
	• Discuss causes, types, symptoms and	C2			hy Cuyton & Holl 14th Edition	
	treatment of schizophrenia				Section 00 (Chapter 60, Dage 756)	
	Define Alzheimer's disease. Mention its	C1			Section 09.(Chapter 60, Page 756)	
	causes, clinical features, incidence and					
	treatment				1	
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	• Outline brief introduction of motor pervous system	C1			• Ganong's Review of	https://www.physio
Introduction to motor	• Give concept of cortical & subcortical motor control	<u>C1</u>	-		MedicalPhysiology 25TH	-
nervous system & Reflex	Briefly explain UMN_LMN_anterior motor	$\frac{C1}{C2}$	-		Edition Section 02	pedia com/Extrapyr
action	neurons & interneurons	02			• (Chapter 12, Page 237, 240)	amidal and Pyrami
Conditioned reflexes &	Define reflex action	C1	-	MCO	<ul> <li>Physiology by Linda S.</li> </ul>	dal Tracts
properties	Define and draw reflex arc	$\frac{C1}{C1}$	LGIS	SEO	Costanzo 6th Edition.(Chapter	https://youtu.be/B8
Properties of reflex action	Enumerate components of reflex arc	<u>C1</u>	-	VIVA	03. Page 110)	8BNYWVkWE
Control of spinal cord	Classify the reflexes	<u>C2</u>	-		Textbook of Medical	
reflexes by higher centers	Define conditioned reflex	<u>C1</u>	-		Physiology by Guyton &	
	Enlist and describe properties of conditioned	<u>C1</u>	-		Hall.14th Edition.	
	reflexes	01			• Section 09.(Chapter 56, Page 697)	
	Give examples of conditioned reflex	C1	-			
	• Enlist and Explain properties of reflex action	C1.C2				
		01,02				
	• Compare & contrast spinal animal with decerebrate	C2	-			
	animal	02				
	Describe organization of spinal cord for motor	C1				
	functions					
	• Explain the concept of cortical & subcortical	C2				
	control.					
	Define UMN & LMN					
	Describe physiological anatomy of cerebellum	C1				
	Classify the functional parts of cerebellum &	C2				
	mention their functions					
	• Describe neuronal circuits of cerebellum in detail	C1				
	• Enumerate the afferent and efferent pathways	C1		MCQ		
Introduction to cerebellum	• Describe the functional unit of cerebellar	C1	LGIS	SEQ		
Neuronal circuits of	cortex & deep cerebellar nuclei			VIVA		
cerebellum Cerebellum and its motor functions	• Explain the role of purkinje cell, Deep nuclear	C2				
	cells and inhibitory cells of cerebellum in overall					
	functions of cerebellum					
	Explain role of climbing fibers	C2	1			
	Discuss the turn-on and turn-off mechanism	C2				
	• Enlist and explain motor functions of cerebellum	C1				

	• Explain the role of vestibulo cerebellum, spino	C2				
	cerebellum & neocerebellum in overall motor control by cerebellum					
	<ul> <li>Describe muscle spindle &amp; Golgi tendon organ in detail</li> </ul>	C1			• Ganong's Review of Medical Physiology.25TH Edition.	https://www.osmosi s.org/learn/Muscle_
Muscle spindle & Golgi	• Explain the receptor function of the Muscle Spindle & Golgi tendon organ	C2			Section 02 (Chapter 12, Page 229,234)	spindles_and_golgi _tendon_organs
tendon organ Role of muscle	• Draw muscle spindle and Golgi tendon organ showing the sensory and motor innervation	C1	LGIS	MCQ SEQ	• Physiological Basis of Medical Practice by Best &	https://youtu.be/Cz eAcc39Cyo
spindle and Golgi tendon organ in voluntary	Explain the dynamic and static response of muscle spindle & Golgi tendon organ	C2		VIVĂ	Taylor's.13th Edition. (Chapter 68, Page 476)	Ĵ
motor activity	Briefly describe muscle stretch reflex	C1	-		Textbook of Medical Physiology	
	• Draw the neuronal circuitry of the stretch reflex	C1	_		by Guyton & Hall.14th Edition.	
	• Explain the static and dynamic components of stretch reflex	C2			Section 09.(Chapter 55, Page 686,691)	
	Discuss the clinical applications of stretch reflex	C2				
	Explain negative stretch reflex	C2				
	• Explain lengthening reaction and its significance	C2				
	<ul> <li>Describe role of muscle spindle and Golgi</li> </ul>	C1				
	tendon organ in voluntary muscle activity					
	• Explain the role of alpha gamma co activation	C2				
Manifestations of cerebellar disease	• Enlist and explain clinical abnormalities of cerebellum	C2	LGIS	MCQ SEQ VIVA		
	Enlist polysynaptic reflexes	C1				
	Describe the polysynaptic reflexes	C1				
Polysynaptic reflexes Transection of spinal cord	<ul> <li>Explain mechanism of reciprocal inhibition and reciprocal innervation</li> </ul>	C2				
Role of brain stem in controlling motor functions Lesions of motor system	• Enlist and describe reflexes of posture and locomotion	C1				
	• Explain scratch reflex	C2		MCQ SEQ VIVA		
	• Enumerate the spinal cord reflexes that cause muscle spasm	C1	LGIS			
	• Enlist autonomic reflexes in the spinal cord	<u>C</u> 1				
	Briefly describe transection of spinal cord	C1				

	<b>_</b>		1	1	1	
	• Explain stages of complete transection	C2				
	• Briefly explain stages of complications in	C2				
	complete transection of spinal cord					
	Describe hemi section of spinal cord	C1				
	<ul> <li>Explain brown-sequard syndrome</li> </ul>	C1				
	• Enumerate and explain role of brainstem in	C1,C2				
	controlling motor function					
	• Explain role of pontine & medullary reticular nuclei	C2				
	• Briefly write role of vestibular nuclei in	C1				
	antigravity muscle control					
	<ul> <li>Summarize decerebrate rigidity</li> </ul>	C1				
	• Enlist the effects of damage to specialized areas of	C1				
	motor cortex					
	<ul> <li>Differentiate UMN Lesion and LMN Lesion</li> </ul>	C2				
	Explain decorticate rigidity	C2				
	• Briefly explain the pathophysiology of	C2				
	syringomyelia, tabs- dorsalis & poliomyelitis					
	• Briefly describe motor areas in cortex	C1	LGIS	MCQ	Ganong's Review of Medical	<ul> <li>https://youtu.be/</li> </ul>
Motor cortex &				SEQ	Physiology.25TH Edition.	hxvep2Y8ShI
physiological importance				VIVA	Section 02 (Chapter 12, Page	https://www.scienc
of neocortex	Draw motor & somatic association areas of motor	C1			243) Dissector and the final of f	edirect.com/science
Corticospinal or pyramidal	cortex				• Physiology by Linda S.	/article/pii/S2214/5
Extra pyramidal ayatam	• Explain functions of motor & somatic association	C2			O3 Page 110)	1923000020
Extra pyrannuar system	areas				• Physiological Basis of Medical	omy info/neuroanat
	Explain allocortex & neocortex	C2			• Thysiological Dasis of Medical Practice by Best &	omy/structures/basa
	• Describe medial and lateral descending pathways	C1			Taylor's 13th Edition (Chapter	l-ganglia
	• Explain transmission of signals from motor cortex to	C2			69. Page 1194)	i gungnu
	muscle		LGIS	MCQ	• Textbook of Medical	
	Draw course of pyramidal tract	C1		SEQ	Physiology by Guyton &	
	Enlist the functions of pyramidal tract	C1		VIVA	Hall.14th Edition. Section	
	Mention the effects of lesions in Corticospinal tract	C1	4		09.(Chapter 57, Page 720)	
	Briefly describe extra pyramidal descending tracts	C1	4			
	Describe rigidity and spasticity	C1	4			
	Describe location and function of red nucleus	C1	4			
	Describe physiological anatomy of basal ganglia	C1				

	• Draw neuronal circuits of basal ganglia	C1
Basal Ganglia & Lesions	• Explain the role of neuronal circuits in	C2
	functioning of basal ganglia	
	• Enlist and explain the physiological role of	C1
	neurotransmitters in basal ganglia system	
	• Enumerate the clinical abnormalities caused by	C1
	damage to basal ganglia	
	Briefly explain Parkinson disease regarding its	C2
	causes, signs and symptoms & treatment	
	• Explain Huntington's Chorea regarding its	C2
	causes, signs and symptoms	

### **Biochemistry Large Group Interactive Session (LGIS)**

Topic	At The End Of Lecture Students Should Be Able To	C/P/A	Teaching Strategy	Assessment Tool
	• Describe synthesis & breakdown of TAGs and factors affecting it	C2	5440085	MCQs
Triglyceride			LGIS	SAQs
Metabolism, Fatty acid transport	• Explain entry of fatty acid into mitochondria (carnitine shuttle)	C2		Viva
	• Describe steps, enzymes, energy calculations of $\beta$ - oxidation of saturated	C2		MCQs
Oxidation of fatty acid	fatty acid (Odd + Even)		LGIS	SAQs
				Viva
	<ul> <li>Discuss other types of oxidations and related disorders</li> </ul>	C2		MCQs
Oxidation of fatty acid			LGIS	SAQs
				Viva
	• Explain the steps, regulation and related diseases of fatty acid synthesis	C2		MCQs
Fatty acid synthesis			LGIS	SAQs
				Viva
	• Describe the steps, regulation and related disorders of Cholesterol	C2		MCQs
Cholesterol Synthesis	Synthesis		LGIS	SAQs
				Viva
Plasma Cholesterol	<ul> <li>Recall normal Plasma Cholesterol level and factors controlling it</li> </ul>	C1		MCQs
level			LGIS	SAQs

				Viva
	• Explain the synthesis and breakdown of Ketone bodies with related diseases	C2		MCQs
Ketone bodies	(ketoacidosis)		LGIS	SAQs
metabolism				Viva
Metabolism of	• Describe the steps of biosynthesis of Glycerophospholipids with its	C2		MCQs
Glycerophospholipid	regulation and clinical significance		LGIS	SAQs
				Viva
Metabolism of	• Explain the steps of biosynthesis of sphingophospholipids with its regulation	C2		MCQs
Sphingophospholipids	and clinical significance		LGIS	SAQs
				Viva
	• Discuss the functions and roll of Lipoproteins & apolipoprotein	C2		MCQs
Introduction to			LGIS	SAQs
Lipoproteins				Viva

	• Explain the composition, functions and clinical significance of LDL& HDL	C2		MCQs
LDL& HDL	Illustrate the mechanism of reverse cholesterol transport	C3	LGIS	SAQs
				Viva
Disorders of	• Classify and explain the disorders of lipoprotein metabolism.	C2		MCQs
lipoprotein metabolism	• (hyper & hypo lipoproteinemia)		LGIS	SAQs
				Viva
	• Interpret conditions leading to Fatty liver	C3		MCQs
Fatty Liver & Adipose	Describe metabolism of adipose tissue & Brown fat	C2	LGIS	SAQs
Tissue				Viva
	• Classify and explain the disorders of lipoprotein metabolism.	C2		MCQs
Disorders of	• (hyper & hypo lipoproteinemia)		LGIS	SAQs
lipoprotein metabolism				Viva

# Anatomy Small Group Discussion (SGDs)

Topic	At The End Of Lecture Students Should Be Able To	C/P/A	Teaching Strategy	Assessment Tool
	• Identify and describe the boundaries of anterior and middle cranial fossae	C2		
	• Discuss anatomical features present in anterior and middle cranial fossa	C2		• MCQs
Anterior & Middle cranial fossae	• Locate foramina and describe the structures passing through them	C2	Skills lab	• SAQs
	• Correlate with the clinical conditions & cross sections.	C3		• SEQ
cranial fossae	• Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		VIVA
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify and describe the boundaries of posterior cranial fossa	C2		
	Discuss anatomical features present in posterior cranial fossa	C2		
	• Locate foramina and describe the structures passing through them	C2	Skills lab	• MCQs
	• Correlate with the clinical conditions & cross sections.	C3		• SAQs
Posterior cranial fossa	• Understand curative and preventive health care measures.	C3		• SEQ
	Practice the principles of bioethics.	C3		• OSPE
	• Apply strategic use of A.I in health care.	C3		VIVA
	Read relevant research article.	C3		
	• Identify and describe meninges and their reflections on specimens and models	C2		
	• Describe the attachments and relations of dural venous sinuses of brain with	C2		
Meninges, Dural	the help of models and specimens			• MCQs
venous sinuses, and	• Discuss the clinical importance of facial vein connection with dural venous	C3	Skills lab	• SAQs
intracranial	sinuses.			• SEQ
nemorrnages	Differentiate between various types of intracranial hemorrhages	C3		• OSPE
	Correlate with the clinical conditions & cross sections.	C3		VIVA
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	Differentiate between different types of headaches	C3		

	• Describe the internal and external structure of spinal cord	C2		
	• Compare the arrangement of white and gray matter in different regions of the	C2		
Spinal cord	spinal cord			
	Enumerate the major ascending and descending tracts of spinal cords	C1		
	• Illustrate the arrangements of ascending and descending tracts in the spinal	C2	Skills lab	• MCQs
	cors			• SAQs
	• Correlate with the clinical conditions & cross sections.	C3		• SEQ
	• Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		VIVA
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	List the ascending tracts of the spinal cord	C1		
	• Tabulate the sensation, receptor, first to third order neurons, pathways and	C2		
	destinations			
	• Describe and illustrate the pathways of lateral spinothalamic tract, anterior	C2		
A	spinothalamic tract, anterior spinocelebellar tract and posterior spinocerebellar		C1-:11- 1-1-	• MCQs
Ascending tracts and	tracts		Skills lab	• SAQs
their clinicals	• Describe and illustrate the pathways of spinotectal tract, spinoreticular tract	C2		• SEQ
	and spino-olivary tracts	~ ~		• OSPE
	• Describe the anatomical basis of the signs and symptoms in lesions of the	C3		VIVA
	ascending tracts	62		
	• Correlate with the clinical conditions & cross sections.	C3		
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	List the descending tracts of the spinal cord	C1		• MCQs
	• Tabulate the sensation, receptor, first to third order neurons, pathways and	C2		• SAQs
Descending tracts and	destinations of pyramidal and extrapyramidal tracts	~	Chille lob	• SEQ
their chinicais	Describe and illustrate the pathways of corticospinal tracts	C2	SKIIIS IAD	• OSPE
	Describe and illustrate the pathways of extrapyramidal tracts	C2		VIVA
	• Describe the anatomical basis of the signs and symptoms in lesions of upper	C3		
	and lower motor neuron lesions			

	• Correlate with the clinical conditions & cross sections.	C3		
	Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Explain anatomical basis of signs and symptoms of anterior and posterior nerve root lesions	C3		
Lesions of Spinal	• Explain anatomical basis of signs and symptoms of complete cord transection syndrome, central cord syndrome, syringomyelia, anterior cord syndrome, Brown-Sequard Syndrome, Poliomyelitis and amyotrophic lateral sclerosis	C3	Skills lab	• MCQs
Cord	• Correlate with the clinical conditions & cross sections.	C3		• SEO
	Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		VIVA
	Read relevant research article.	C3		
	• Identify and describe gross features of medulla and identify them on gross specimen/model.	C2		
	• Identify and describe internal structure of medulla on cross sectional diagrams.	C2		• MCQs
Medulla oblongata	• Describe the anatomical basis and clinical features of raised pressure in posterior cranial fossa, Arnold Chiari malformation, lateral and medial medullary syndrome.	C2	Skills lab	• SAQs • SEQ
	<ul> <li>Correlate with the clinical conditions &amp; cross sections.</li> </ul>	C3	-	• OSPE
	<ul> <li>Understand curative and preventive health care measures.</li> </ul>	C3		VIVA
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify and describe the gross features of Pons on a given specimen/model	C2		• MCQs
Pons & the	• Identify and describe internal structure of pons on cross sectional diagrams.	C2		• SAOs
Fourth ventricle	Describe the boundaries and relations of 4th ventricle	C2		• SEO
	• Describe the anatomical basis of clinical features of tumors, hemorrhage and infarctions of pons	C3	Skills lab	• OSPE
	<ul> <li>Correlate with the clinical conditions &amp; cross sections.</li> </ul>	C3		VIVA
	<ul> <li>Understand curative and preventive health care measures.</li> </ul>	C3		
	Practice the principles of bioethics.	C3		

	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify and describe the gross features of Pons on a given specimen/model	C2		
	• Identify and describe internal structure of pons on cross sectional diagrams.	C2		
	• Describe the boundaries and relations of 4th ventricle	C2		• MCQs
Midbrain & Cerebral	• Describe the anatomical basis of trauma, cerebral aqueduct stenosis and vascular lesions of midbrain.	C3	Skills lab	• SAQs • SEO
aqueduct	Correlate with the clinical conditions & cross sections.	C3		• OSPE
	Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		VIVA
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3	-	
	Identify and describe the gross features of cerebellum	C1		
	• Describe internal structure of gray and white matter of cerebellar cortex	C2	-	
	Describe the cerebellar cortical mechanisms	C1	-	
	Describe afferent and efferent fibers of cerebellum	C2		
	Discuss the functions of cerebellum	C2	-	
Cerebellum	• Describe the anatomical basis of signs and symptoms of cerebellar diseases such as hypotonia, gait alteration, ataxia, dysdiadochokinesia, disturbances in reflexes, disturbances in ocular movement, disorders of speech	C3	Skills lab	• MCQs • SAQs • SEQ
	• Describe the anatomical basis of signs and symptoms of cerebellar syndromes such as vermis syndrome and cerebellar hemisphere syndrome	C3		• OSPE
	Correlate with the clinical conditions & cross sections.	C3	-	
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3	]	
Thalamus	• Identify and describe the gross structure of thalamus, epithalamus and	C2		• MCQs
Epithalamus & Subthalamus	Enlist nuclei of the lamus anithe lamus & subthe lamus and describe their	C1	Skills lab	• SAQs
	functions			• SEQ
	<ul> <li>Describe the anatomical basis for the lesions of thalamus enithalamus and</li> </ul>	C3	-	• OSPE
	subthalamus such as thalamic pain and thalamic hand			• VIVA
	<ul> <li>Correlate with the clinical conditions &amp; cross sections.</li> </ul>	C3	-	
			1	

	• Understand curative and preventive health care measures	C3		
	Olderstand curative and preventive health care measures.     Drastics the principles of biosthics	$C_3$	-	
	Practice the principles of bloetnics.	$C_{2}$	-	
	• Apply strategic use of A.1 in health care.	$C_{3}$	-	
	• Read relevant research article.	$C_{3}$		
	• Enlist nuclei of thalamus, epithalamus & subthalamus and describe their	CI		
		<u> </u>	-	
	• Identify and describe the functions of tuber cinereum and mamillary bodies	C2 C2		• MCQs
Hypothalamus and 3 <sup>rd</sup>	• Describe the various afferent and efferent connections of hypothalamic nuclei	C2	-	• SAQs
Ventricle	• Describe the anatomical basis for the lesions of hypothalamus and	C3	Skills lab	• SEQ
Ventriere	hypothalamic syndromes	~	Skills lab	• OSPE
	• Describe the boundaries and relations of the 3rd ventricle	C2	-	
	Correlate with the clinical conditions & cross sections.	C3	-	• VIVA
	Understand curative and preventive health care measures.	C3	-	
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	• Read relevant research article.	C3		
	• Identify and describe the gross features of cerebrum	C2		• MCQs
	• Identify the describe the lobes and subdivisions of cerebrum	C2	Skills lab	
	• Identify the sulci and gyri of cerebral cortex and describe their functions	C2		
	• Identify and describe the commissural, association and projection fibers	C2		
Cortical areas, Layers	present in the white matter of the brain.			• SAQs
and Lesions of	• Discuss the anatomical basis of lesions of internal capsule and alzheimer's	C3		• SEQ
Cerebrum	disease			• OSPE
	• Discuss the anatomical basis of cerebral cortical lesions of the motor cortex,	C3		• VIVA
	frontal eye field, motor & sensory speech areas, prefrontal cortex, sensory			• • • • • •
	cortex and visual areas			
	• Discuss the anatomical basis of schizophrenia and frontal lobectomy	C3		
	• Discuss the basis cerebral dominance, consciousness, persistent vegetative	C3		
	state, sleep and epilepsy.			
	• Correlate with the clinical conditions & cross sections.	C3		
	• Understand curative and preventive health care measures.	C3	]	
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3	1	
	• Read relevant research article.	C3	1	

	Describe the relations and boundaries of lateral ventricle	C2		
	Describe the formation of choroid plexus in ventricles	C2		
	• Explain the function, production, circulation, and absorption of cerebrospinal fluid	C2		
Lateral Ventricle	Explain the causes of overproduction and blockage of CSF	C2	-	
&CSF	• Discuss the anatomical basis of various types of hydrocephalus and papilledema.	C3	Skills lab	
	• Discuss the formation and clinical significance of blood brain barrier, blood CSF barrier and CSF Brain interface.	C3		• MCQs • SAQs
	• Correlate with the clinical conditions & cross sections.	C3		• SEQ
	• Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		• VIVA
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify the nuclei and connections of CN I,II,II,IV,VI	C2		
	• Trace the pathway and perform reflexes associated with of CN I,II,II,IV,VI	C2	-	
Cranial nerves	• Describe the anatomical basis of lesions of visual pathway and ophthalmoplegias	C3	Skills lab	<ul><li>MCQs</li><li>SAQs</li></ul>
I,II,II,IV,VI	• Correlate with the clinical conditions & cross sections.	C3		• SEO
	• Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		• VIVA
	Apply strategic use of A.I in health care.	C3		• • • • • • • •
	Read relevant research article.	C3		
	• Identify the nuclei and connections of CN V,VII	C2		
Cranial nerves	Trace the pathway and perform reflexes associated with of CN V,VII	C2		• MCQs
V,VII	• Describe the anatomical basis of upper and lower motor neuron lesion of CN V and trigeminal neuralgia	C3	Skills lab	• SAQs • SEQ
	• Correlate with the clinical conditions & cross sections.	C3		• OSPE
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		• VIVA
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
Cranial nerves	Identify the nuclei and connections of CN VIII-XII	C2		

VIII-XII	• Trace the pathway and perform reflexes associated with of CN VIII-XII	C2		
	• Discuss the anatomical basis of vertigo, nystagmus, deafness, tinnitus, taste	C3		• MCQs
	and gag reflex		Skills lab	• SAQs
	• Discuss the anatomical basis of paralysis of muscles supplied by accessory and	C3		• SEQ
	hypoglossal nerves			• OSPE
	Correlate with the clinical conditions & cross sections.	C3		• VIVA
	Understand curative and preventive health care measures.	C3		• VIVA
	Practice the principles of bioethics.	C3		
	Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	Enlist components of basal ganglia	C1		
	Discuss functions of basal ganglia	C2		
	Describe the connections of basal ganglia	C2		
	• Discuss the anatomical basis of hypo and hyperkinetic disorders such as	C3	01.11.1.1	• MCQs
Basal ganglia	chorea, hemiballismus, Parkinson's disease and athetosis.		Skills lab	• SAQs
	• Correlate with the clinical conditions & cross sections.	C3		• SEQ
	• Understand curative and preventive health care measures.	C3		• OSPE
	Practice the principles of bioethics.	C3		VIVA
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	Enlist components and connections of limbic system	C1		
	Discuss functions of limbic system	C2		• MCQs
Limbic system &	• Describe the connections of limbic system	C2	Skills lab	• SAQs
Reticular formation	Enlist components of reticular system	C1		• SEQ
	Discuss functions of reticular system	C2		• OSPE
	Describe the connections of reticular system	C1		• VIVA
	• Discuss the anatomical basis of loss of consciousness, schizophrenia, Kluver-	C3		• • • • • • • • •
	Bucy syndrome and temporal lobe dysfunction			
	• Correlate with the clinical conditions & cross sections.	C3		
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		

	• Describe the arterial supply of brain and spinal cord from internal carotid	C2		
	artery and vertebrobashar systems	<u>C2</u>		• MCQs
Blood Supply of Brain	• Describe the circle of willis along with its clinical significance	$C_2$	Skills lab	• SAQs
and clinicals	• Describe the venous drainage of brain and spinal cord	C2	SKIIIS Ido	• SEQ
	• Discuss the anatomical basis of signs and symptoms of cerebral vessel occlusions and spinal cord ischemias.	C3		• OSPE
	• Correlate with the clinical conditions & cross sections & cross sections	C3		• VIVA
	• Understand curative and preventive health care measures.	C3		
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify and describe the appearance of different parts of brain in	C2		
	<ul> <li>Normal radiographs</li> </ul>			
	o MRI			
Radiological Imaging	• CT scan		Skills lab	• MCQs
of CNS	Correlate with the clinical conditions & cross sections.	C3		• SAQs
	Understand curative and preventive health care measures.	C3		• SEQ
	Practice the principles of bioethics.	C3		• OSPE
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		• VIVA
	• Identify different structures of male pelvis at different levels; S5, coccyx,	C2		
Cross Sectional	Symphysis pubis, ischial tuberosity, anal verge		Skill Lab	• MCQs
Anatomy	• Identify different structures of female pelvis at different levels; S5, coccyx,	C2		• SAQs
	Symphysis pubis, ischial tuberosity, anal verge	C3		• SEO
	Practice the principles of bioethics.	C3		• OSPE
	• Apply strategic use of A.I in health care	C3		
	Read a relevant research article	C3		• VIVA
	•			

Topic	At The End Of This LGIS, Second Year MBBS Students Should Be Able To:	Learning	Teaching	Assessment
		Objectives	Strategy	Tools
	Describe the general organization of nervous system	C1		
	Describe major levels of CNS functions	C1	LGIS	MCQ
	Briefly explain nerve fiber structure, classification & properties	C2		SEQ
	Describe labeled line principle	C1		VIVA
	Define synapse	C1		
	Enumerate & compare types of synapses	C2		
~ ~ ~	Describe process of synaptic transmission	C1		
Synapse & Sensory	• Enumerate the important neurotransmitters of nervous system	C1		
Receptors	• Enumerate & explain different types of sensory receptors according to	C1		
	function			
	• Enumerate & explain different types of sensory receptors according to	C2		
	location			MCQ
	<ul> <li>Enlist various properties of sensory receptors</li> </ul>	C1	LGIS	SEQ
	• Describe mechanism of signal transduction & generation of receptor	C1		VIVA
	potential			
	• Describe mechanism of adaptation of different types of receptors	C1		
	Describe the properties of sensory receptors	C1		
	• Describe the types and characteristics of tactile receptors	C1		
	• Briefly explain the electrical events during neuronal excitation and	C2		
	inhibition		LGIS	MCQ
	• Explain temporal and spatial summation	C1		SEQ
	• Enlist & explain various characteristics of synaptic transmission	C1		VIVA
	• Describe visceral pain and its causes	C1		
	Define headache	C1		
	• Enlist the types of headache & their causes	C1		
	• Explain the analgesia system	C2		
	Describe thermal receptors	C1		
	• Explain mechanism of excitation of thermal receptors	C2		
	Describe transmission of thermal signals in nervous system	C1		

# **Physiology Small Group Discussion (SGDs)**

	Describe general organization of autonomic nervous system	C1		
Introduction to outonomia	• Enumerate the functions of autonomic nervous system	C1		MCO
nervous system	• Describe sympathetic and parasympathetic nervous system	C1	LGIS	SEO
Basic Characteristics of	• Enumerate & explain their receptors, neurotransmitters &	C1		VIVA
sympathetic &	physiological effects	<u>C1</u>	-	
parasympathetic function	• Describe physiological anatomy & effects of adrenal medulla	CI		
	• Briefly explain physiological actions of ANS, vasomotor tone, vagal tone & sympathetic stress response	C2		МСО
	• Draw a table showing autonomic effects on various body organs	C1	LGIS	SEO
	Briefly describe the pharmacology of autonomic nervous system	C1		VIVÀ
	Outline brief introduction of motor nervous system	C1		
Introduction to motor	Give concept of cortical & subcortical motor control	C1	-	
nervous system & Reflex action	Briefly explain UMN, LMN, anterior motor neurons & interneurons	C2		
Conditioned reflexes &	Define reflex action	C1	-	MCO
properties	• Define and draw reflex arc	<u>C1</u>	LGIS	SEQ
Properties of reflex action	Enumerate components of reflex arc	C1	-	VIVĂ
Control of spinal cord	Classify the reflexes	C2	-	
reflexes by higher centers	Define conditioned reflex	C1		
	• Enlist and describe properties of conditioned reflexes	C1		
	Give examples of conditioned reflex	C1		
	Enlist and Explain properties of reflex action	C1,C2		
	• Compare & contrast spinal animal with decerebrate animal	C2	-	
	Describe organization of spinal cord for motor functions	C1	-	
	• Explain the concept of cortical & subcortical control.	C2		
	• Define UMN & LMN			
	Describe physiological anatomy of cerebellum	C1		
	Classify the functional parts of cerebellum & mention their functions	C2		
	Describe neuronal circuits of cerebellum in detail	C1		
	Enumerate the afferent and efferent pathways	C1		MCQ

Introduction to cerebellum Neuronal circuits of	• Describe the functional unit of cerebellar cortex & deep cerebellar nuclei	C1	LGIS	SEQ VIVA
cerebellum Cerebellum and its motor	• Explain the role of purkinje cell, Deep nuclear cells and inhibitory cells of cerebellum in overall functions of cerebellum	C2		
functions	Explain role of climbing fibers	C2	-	
	Discuss the turn-on and turn-off mechanism	$C^2$		
	Enlist and explain motor functions of cerebellum	C1	-	
	• Explain the role of vestibulo cerebellum, spino cerebellum &	C2		
	neocerebellum in overall motor control by cerebellum	01		
	• Describe muscle spindle & Golgi tendon organ in detail	C1		
	• Explain the receptor function of the Muscle Spindle & Golgi tendon	C2		
	<ul> <li>Draw muscle spindle and Golgi tendon organ showing the sensory and motor innervation</li> </ul>	C1	-	MCQ
Muscle spindle & Golgi	• Explain the dynamic and static response of muscle spindle & Golgi tendon organ	C2	LGIS	SEQ VIVA
tendon organ	Briefly describe muscle stretch reflex	C1	-	
Role of muscle	Draw the neuronal circuitry of the stretch reflex	Cl		
spindle and Golgi	• Explain the static and dynamic components of stretch reflex	C2		
tendon organ in voluntary	• Discuss the clinical applications of stretch reflex	C2	-	
motor activity	• Explain negative stretch reflex	C2		
	• Explain lengthening reaction and its significance	C2		
	• Describe role of muscle spindle and Golgi tendon organ in voluntary muscle activity	C1		
	• Explain the role of alpha gamma co activation	C2	-	
	• Enlist polysynaptic reflexes	C1		
	Describe the polysynaptic reflexes	C1		
	• Explain mechanism of reciprocal inhibition and reciprocal innervation	C2		
	• Enlist and describe reflexes of posture and locomotion	C1		
	• Explain scratch reflex	C2		
	Enumerate the spinal cord reflexes that cause muscle spasm	C1		
	• Enlist autonomic reflexes in the spinal cord	C1		MCQ
	Briefly describe transection of spinal cord	C1	LGIS	SEQ
	• Explain stages of complete transection	C2		VIVA
	Briefly explain stages of complications in complete transection of spinal	C2		

	cord			
	Describe hemi section of spinal cord	C1		
	• Explain brown-sequard syndrome	C1		
	• Enumerate and explain role of brainstem in controlling motor function	C1,C2		
	• Explain role of pontine & medullary reticular nuclei	C2		
	Briefly write role of vestibular nuclei in antigravity muscle control	C1		
	Summarize decerebrate rigidity	C1		
	• Enlist the effects of damage to specialized areas of motor cortex	C1		
	Differentiate UMN Lesion and LMN Lesion	C2		
	• Explain decorticate rigidity	C2		
	• Briefly explain the pathophysiology of syringomyelia, tabs- dorsalis &	C2		
	poliomyelitis			
	Briefly describe motor areas in cortex	C1	LGIS	MCQ
Motor cortex &	Draw motor & somatic association areas of motor cortex	C1		SEQ
physiological importance	Explain functions of motor & somatic association areas	C2		VIVA
of neocortex	Explain allocortex & neocortex	C2		
Corticospinal or pyramidal	Describe medial and lateral descending pathways	C1		
tract	• Explain transmission of signals from motor cortex to muscle	C2		
Extra pyramidal system	Draw course of pyramidal tract	C1	LGIS	MCQ
	Enlist the functions of pyramidal tract	C1		SEQ
Basal Ganglia & Lesions	<ul> <li>Mention the effects of lesions in Corticospinal tract</li> </ul>	C1		VIVA
	Briefly describe extra pyramidal descending tracts	C1		
	• Describe rigidity and spasticity	C1		
	• Describe location and function of red nucleus	C1		
	<ul> <li>Describe physiological anatomy of basal ganglia</li> </ul>	C1		
	Draw neuronal circuits of basal ganglia	C1		
	• Explain the role of neuronal circuits in functioning of basal ganglia	C2		
	• Enlist and explain the physiological role of neurotransmitters in basal	C1		
	ganglia system			
	• Enumerate the clinical abnormalities caused by damage to basal ganglia	C1		
	• Briefly explain Parkinson disease regarding its causes, signs and	C2		
	symptoms & treatment			
	• Explain Huntington's Chorea regarding its causes, signs and symptoms	C2		
Limbic system	Describe the concept of limbic system	C1		
Functions of hypothalamus	<ul> <li>Describe physiological anatomy of limbic system</li> </ul>	C1		

• Enumerate and explain the roles of hippocampus, amygdala and limbic cortex	C1	
Describe physiological anatomy of hypothalamus	C1	
Enlist functions of hypothalamus	C1	
• Explain role of hypothalamus in:	C2	
• Vegetative function		
<ul> <li>Endocrine function Behavioral function</li> </ul>		
Reward and punishment function		

### **Biochemistry Small Group Discussion (SGDs)**

Topic	At The End Of Tutorial Students Should Be Able To	C/P/A	Teaching Strategy	Assessment Tool
Triglycerides & F.A. oxidation	• Explain the functions & uses of triglycerides and steps of oxidation of Fatty acids	C2	SGD	MCQs SAQs Viva
Fatty acid synthesis & cholesterol metabolism	• Describe the steps of fatty acid synthesis, cholesterol, their functions& clinical significance	C2	SGD	MCQs SAQs Viva
Ketone bodies &	• Describe the synthesis & breakdown of ketone bodies and factors affecting them.	C2	SGD	MCQs SAQs
Phospholipids	• Describe the phospholipids synthesis & their functions	C2		Viva
Lipoprotein (HDL)	• Explain HDL synthesis, its functions & clinical significance	C2	SGD	MCQs SAQs Viva
Lipoprotein (VLDL, LDL)	• Explain synthesis, functions & clinical significance of VLDL, LDL	C2	SGD	MCQs SAQs Viva

Topics	Learning objectives	Learning Resources
Anterior And middle Cranial Fossa	<ul> <li>Identify and describe the boundaries of anterior and middle cranial fossae</li> <li>Discuss anatomical features present in anterior and middle cranial fossa</li> <li>Locate foramina and describe the structures passing through them</li> </ul>	<ul> <li>Clinically Oriented Anatomy, 9th Edition, pg no. 840-861</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp;p p=ygUSY25zIGFuYXRvbXkgdmlkZW9z</li> <li>https://link.springer.com/article/10.1007/s00701- 013-1937-0</li> </ul>
Posterior cranial fossa Dural venous sinuses and intracranial hemorrhages Meninges & Spinal cord	<ul> <li>Identify and describe meninges and their reflections on specimens and models</li> <li>Describe the attachments and relations of dural venous sinuses of brain with the help of models and specimens</li> <li>Discuss the clinical importance of facial vein connection with dural venous sinuses.</li> <li>Differentiate between various types of intracranial hemorrhages</li> <li>Differentiate between different types of headaches</li> <li>Describe the internal and external structure of spinal cord</li> <li>Compare the arrangement of white and gray matter in different regions of the spinal cord</li> <li>Enumerate the major ascending and descending tracts of spinal cords</li> <li>Illustrate the arrangements of ascending and descending tracts in the spinal cord</li> </ul>	<ul> <li>Clinically Oriented Anatomy, 9th Edition, pg no. 840-861, 884-885, 895</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp;p p=ygUSY25zIGFuYXRvbXkgdmlkZW9z</li> <li>https://www.tandfonline.com/doi/abs/10.3109/0268 8699308995089</li> <li>Clinically Oriented Anatomy, 9th Edition, pg no. 132-139, 883, 890-891</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp;p p=ygUSY25zIGFuYXRvbXkgdmlkZW9z</li> <li>https://link.springer.com/chapter/10.1007/978-981- 15-7771-0_3</li> </ul>
Ascending tracts & Descending tracts	<ul> <li>List the ascending tracts of the spinal cord</li> <li>Tabulate the sensation, receptor, first to third order neurons, pathways and destinations</li> <li>Describe and illustrate the pathways of lateral spinothalamic tract, anterior spinothalamic tract, anterior spinocelebellar tract and posterior spinocerebellar tracts</li> <li>Describe and illustrate the pathways of spinotectal tract, spinoreticular tract and spino-olivary tracts</li> <li>Describe the anatomical basis of the signs and symptoms in lesions of the ascending tracts</li> </ul>	<ul> <li>Snell's Clinical Neuroanatomy 8th Edition, pg no. 131-182</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp;p p=ygUSY25zIGFuYXRvbXkgdmlkZW9z https://link.springer.com/chapter/10.1007/978-1- 4684-7688-0_7</li> </ul>

# Anatomy Self-Directed Learning (SDL)

Medulla Oblongata, Pons& Cerebellum	<ul> <li>Identify and describe gross features of medulla and identify them on gross specimen/model.</li> <li>Identify and describe internal structure of medulla on cross sectional diagrams.</li> <li>Identify and describe the gross features of Pons on a given specimen/model</li> <li>Identify and describe internal structure of pons on cross sectional diagrams.</li> <li>Identify and describe the gross features of cerebellum</li> <li>Describe internal structure of gray and white matter of cerebellar cortex</li> <li>Describe the cerebellar cortical mechanisms</li> </ul>	<ul> <li>Snell's Clinical Neuroanatomy 8th Edition, pg no. 185-247</li> <li><u>https://www.youtube.com/watch?v=auogbJFitmI&amp;pp=ygUSY25zIGFuYXRvbXkgdmlkZW9zhttps://link.springer.com/chapter/10.1007/978-1-61779-779-8_13</u></li> </ul>
Midbrain and Diencephalon	<ul> <li>Identify and describe the gross features of Pons on a given specimen/model</li> <li>Identify and describe internal structure of pons on cross sectional diagrams.</li> <li>Describe the boundaries and relations of 4th ventricle</li> <li>Describe the anatomical basis of trauma, cerebral aqueduct stenosis and vascular lesions of midbrain.</li> </ul>	<ul> <li>Snell's Clinical Neuroanatomy 8th Edition, pg no. 209, 363-372</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp;p p=ygUSY25zIGFuYXRvbXkgdmlkZW9z https://link.springer.com/chapter/10.1007/978-3-319-60187-8_8</li> </ul>
Cerebrum & Ventricular system	<ul> <li>Identify and describe the gross structure of thalamus, epithalamus and subthalamus</li> <li>Enlist nuclei of thalamus, epithalamus &amp; subthalamus and describe their functions</li> <li>Identify and describe the functions of tuber cinereum and mamillary bodies</li> <li>Describe the relations and boundaries of ventricles</li> <li>Describe the formation of choroid plexus in ventricles</li> <li>Explain the function, production, circulation, and absorption of cerebrospinal fluid</li> <li>Explain the causes of overproduction and blockage of CSF</li> </ul>	<ul> <li>Snell's Clinical Neuroanatomy 8th Edition, pg no. 249-277, 436-462</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp; pp=ygUSY25zIGFuYXRvbXkgdmlkZW9z</li> <li>https://link.springer.com/article/10.1007/BF00344 224</li> <li>https://www.tandfonline.com/doi/full/10.1080/102 55840701492118</li> </ul>
Canial Nerves 1-7	<ul> <li>Identify the nuclei and connections of CN 1,2,3,4,&amp; 6</li> <li>Trace the pathway and perform reflexes associated with of CN 1,2,3,4,&amp; 6</li> <li>Describe the anatomical basis of lesions of visual pathway and ophthalmoplegias</li> <li>Identify the nuclei and connections of CN 5 &amp; 7</li> </ul>	<ul> <li>Snell's Clinical Neuroanatomy 8th Edition, pg no. 323-361</li> <li><u>https://www.youtube.com/watch?v=auogbJFitmI&amp; pp=ygUSY25zIGFuYXRvbXkgdmlkZW9z</u></li> <li><u>https://link.springer.com/referenceworkentry/10.1</u> 007/978-3-540-29678-2_1315</li> </ul>

Cranial Nerves 8-12, Basal Ganglia, Limbic system and Reticular Formation	<ul> <li>Trace the pathway and perform reflexes associated with of CN 5 &amp; 7</li> <li>Describe the anatomical basis of upper and lower motor neuron lesion of CN 5 and trigeminal neuralgia</li> <li>Identify the nuclei and connections of CN 8-12</li> <li>Trace the pathway and perform reflexes associated with of CN 8-12</li> <li>Discuss the anatomical basis of vertigo, nystagmus, deafness, tinnitus, taste and gag reflex</li> <li>Discuss the anatomical basis of paralysis of muscles supplied by accessory and hypoglossal nerves</li> <li>Enlist components and connections of limbic system</li> <li>Describe the connections of limbic system</li> <li>Enlist components of reticular system</li> <li>Discuss functions of reticular system</li> <li>Discuss the anatomical basis of loss of consciousness, schizophrenia, Kluver-Bucy syndrome and temporal lobe dysfunction</li> </ul>	<ul> <li>Clinically Oriented Anatomy 9th Edition, pg no. 299-308, 310- 321, 323-361.</li> <li>https://www.youtube.com/watch?v=auogbJFitmI&amp; pp=ygUSY25zIGFuYXRvbXkgdmlkZW9z</li> <li>https://link.springer.com/referenceworkentry/10.1 007/978-3-540-29678-2_1315</li> <li>https://link.springer.com/book/10.1007/978-1-4615-1235-6</li> </ul>
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# **Physiology Self-Directed Learning (SDL)**

Topics	Learning objectives	Learning Resources
Pathways for transmitting somatic signals	<ul> <li>Classify somatic senses</li> <li>Describe the sensory pathways for transmission of somatic sensations to central nervous system.</li> <li>Enumerate sensations carried by dorsal column system and anterolateral system</li> <li>Describe the characteristics of transmission in the dorsal column medial lemniscal system and anterolateral system</li> <li>Compare and contrast dorsal column medial lemniscal system and anterolateral system</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Central and Peripheral Neurophysiology Section 02 (Chapter 08, Page 168)</li> <li>Physiology by Linda S. Costanzo 6th Edition. Neurophysiology (Chapter 03. Page 82)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 48, Page 601,609)</li> <li>https://youtu.be/432AD7JZnKE</li> <li>https://www.osmosis.org/learn/Somatosensory pathways</li> </ul>
Somatosensory cortex	Explain cortical mapping & association cortex	• Textbook of Medical Physiology by Guyton & Hall.14th
Somatosensory cortex	<ul> <li>Describe resions of somatosensory areas</li> <li>Summarize role of thalamus in somatic sensations</li> </ul>	<ul> <li>https://nba.uth.tmc.edu/neuroscience/m/s2/chapter04.htm</li> </ul>

	Interpret the importance of dermatomes	<ul> <li>https://teachmeanatomy.info/neuroanatomy/pathways/asc ending-tracts-sensory/</li> </ul>
Introduction to autonomic nervous system Basic Characteristics of sympathetic & parasympathetic function	<ul> <li>Describe general organization of autonomic nervous system</li> <li>Enumerate the functions of autonomic nervous system</li> <li>Describe sympathetic and parasympathetic nervous system</li> <li>Enumerate &amp; explain their receptors, neurotransmitters &amp; physiological effects</li> <li>Describe physiological anatomy &amp; effects of adrenal medulla</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. (Chapter 13, Page 255,259)</li> <li>Physiology by Linda S. Costanzo 6th Edition. Autonomic Nervous System(Chapter 02. Page 47,59)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8TH Edition.The Central Nervous System (Chapter 11 Page 392)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 61, Page 763,765)</li> <li>. https://www.kenhub.com/en/library/anatomy/autonom ic-nervous-system</li> <li>https://youtu.be/j9pUItHAAhs 7 https://youtu.be/7pGKa-1tSJw https://youtu.be/gBOAYgMxq-Q</li> </ul>
Excitatory & inhibitory effects of sympathetic & parasympathetic stimulation	<ul> <li>Briefly explain physiological actions of ANS, vasomotor tone, vagal tone &amp; sympathetic stress response</li> <li>Draw a table showing autonomic effects on various body organs</li> <li>Briefly describe the pharmacology of autonomic nervous system</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. (Chapter 13, Page 264)</li> <li>Physiology by Linda S. Costanzo 6th Edition. Autonomic Nervous</li> <li>System(Chapter 02. Page 55)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8TH Edition. The Central Nervous System (Chapter 11 Page 397)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 61, Page 768)</li> <li>https://youtu.be/7pGKa-1tSJw</li> <li>https://www.kenhub.com/en/library/anatomy/autonomic- nervous-system</li> <li>https://www.diffen.com/difference/Parasympathetic_ner vous_system_vs_Sympathetic_nervous_system</li> </ul>
,	<ul> <li>Describe briefly the physiological anatomy of cerebral blood flow</li> <li>Explain cerebrospinal fluid system</li> </ul>	Physiology by Linda S. Costanzo 6th Edition. Neurophysiology (Chapter 03. Page 113)

Blood brain barrier, Blood CSF Barrier, Lumber puncture	<ul> <li>Describe the CSF pressure, its</li> <li>measurement by lumbar puncture, &amp; hydrocephalus</li> <li>Explain blood CSF barrier</li> <li>&amp; BBB</li> <li>Describe brain edema</li> </ul>	<ul> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 62, Page 777-784)</li> <li><u>https://youtu.be/f9xi1Rf5m9w</u></li> <li>https://www.sciencedirect.com/topics/neuroscience/bloo d-cerebrospinal-fluid-barrier</li> </ul>
Limbic system, Functions of hypothalamus	• Describe the concept of limbic system	<ul> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition</li> <li>https://youtu.be/h3K9RfGw8sI</li> <li>https://www.endocrineweb.com/endocrinology/overview -hypothalamus</li> </ul>
Learning and memory	<ul> <li>Define memory &amp; classify its various types</li> <li>Describe role of synaptic inhibition and synaptic facilitation in memory Explain mechanism of short term, intermediate and long-term memory Describe mechanism of consolidation of memory Enumerate specific parts of brain involved in memory</li> <li>Explain the role of each part</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02 (Chapter 15, Page 283)</li> <li>Physiology by Linda S. Costanzo 6th Edition.(Chapter 03. Page 112)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8TH Edition.The Central Nervous System (Chapter 09 Page 332)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 58, Page 735)</li> <li>https://youtu.be/EqdsQDM5Fys</li> <li>https://www.sciencedirect.com/topics/psychology/learni ng-and-memory</li> </ul>
Concept of Association areas, Concept of Dominant and non-dominant cerebral hemispheres	<ul> <li>Draw association areas of brain</li> <li>Describe association areas of brain regarding their physiological role</li> <li>Explain briefly the clinical features, if</li> <li>the association areas become damaged</li> <li>Describe concept of dominant hemisphere</li> <li>Enlist role of parietooccipito temporal cortex in non-dominant hemisphere</li> </ul>	<ul> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition.</li> <li>Section 09.(Chapter 58, Page 727)</li> <li>https://my.clevelandclinic.org/health/articles/23073- cerebral-cortex https://youtu.be/2Z425-CHY1c</li> </ul>
Speech and aphasia	<ul> <li>Describe sensory and motor aspects of communication Define Wernicke's aphasia, Motor aphasia &amp; Global aphasia</li> <li>Explain Wernicke's aphasia, Motor aphasia &amp; Global</li> <li>aphasia</li> <li>Describe function of corpus callosum &amp; anterior commissure in transferring information between two cerebral hemispheres</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. (Chapter 15, Page 290,293)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13th Edition. (Chapter 70, Page 1211)</li> <li><u>https://www.sciencedirect.com/science/article/abs/pii/S0</u> 021992422000892</li> </ul>

		• https://www.stroke.org.uk/what-is-aphasia/types-of- aphasia
EEG and epilepsy	<ul> <li>Describe brain waves</li> <li>Enumerate different types of brain wave</li> <li>Explain the origin of different brain waves</li> <li>Describe EEG</li> <li>Define epilepsy</li> <li>Enumerate various types of epilepsy</li> <li>Explain various types of epilepsy</li> <li>Describe role of norepinephrine, serotonin and</li> <li>dopamine in psychotic disorders</li> <li>Describe the causes, symptoms &amp; treatment of depression &amp; bipolar disorder</li> <li>Discuss causes, types, symptoms and treatment of</li> <li>Schizophrenia</li> <li>Define Alzheimer's disease. Mention its causes, clinical features, incidence and treatment</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02 (Chapter 14, Page 275)</li> <li>Physiology by Linda S. Costanzo 6th Edition.(Chapter 03. Page 42)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13th Edition. (Chapter 70, Page 1209)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 60, Page 756)</li> <li>https://www.webmd.com/epilepsy/guide/types-epilepsy https://youtu.be/T7MKIPYiL48</li> </ul>
Reticular activating system and sleep	<ul> <li>Describe activating driving system of the brain Explain the reticular activating system Discuss the control of cerebral activity by signals from brain stem Explain neurohormonal system of the brain</li> <li>Define sleep and enumerate types of sleep</li> <li>Compare and contrast between two types of sleep Describe the basic theories of sleep in detail</li> <li>Explain physiological effects</li> <li>of sleep</li> <li>Describe sleep and wakefulness cycle</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02 (Chapter 14, Page 269,272,278)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8TH Edition. Sensory Physiology (Chapter 10 Page 344)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13th Edition. (Chapter 70, Page 12031208)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 60, Page 753)</li> <li>https://youtu.be/TdGQvWAZ0Cs</li> <li>https://www.physio-pedia.com/Reticular Formation</li> </ul>
Muscle spindle & Golgi tendon organ, Role of muscle spindle and Golgi tendon organ in voluntary motor activity	<ul> <li>Describe muscle spindle &amp;</li> <li>Golgi tendon organ in detail</li> <li>Explain the receptor function of the Muscle Spindle &amp; Golgi tendon organ</li> <li>Draw muscle spindle and Golgi tendon organ showing the sensory and motor innervation</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02 (Chapter 12, Page 229,234)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13th Edition. (Chapter 68, Page 476)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 55, Page 686,691)</li> <li>https://www.osmosis.org/learn/Muscle_spindles_and_go lgi_tendon_organs https://youtu.be/CzeAcc39Cyo</li> </ul>

	<ul> <li>Briefly describe muscle stretch reflex</li> <li>Draw the neuronal circuitry of the stretch reflex</li> <li>Explain the static and dynamic components of stretch reflex</li> <li>Discuss the clinical applications of stretch reflex</li> <li>Explain negative stretch reflex</li> <li>Explain lengthening reaction and its significance</li> <li>Describe role of muscle spindle and Golgi tendon organ in voluntary muscle</li> <li>activity</li> </ul>	
Motor cortex & physiological importance of neocortex, Corticospinal or pyramidal tract, Extra pyramidal system	<ul> <li>Explain the role of alpha gamma co activation</li> <li>Briefly describe motor areas in cortex</li> <li>Draw motor &amp; somatic association areas of motor cortex</li> <li>Explain functions of motor &amp; somatic association areas</li> <li>Explain allocortex &amp; neocortex</li> <li>Describe medial and lateral descending pathways</li> <li>Explain transmission of signals from motor cortex to muscle</li> <li>Draw course of pyramidal tract</li> <li>Enlist the functions of pyramidal tract</li> <li>Mention the effects of lesions in Corticospinal tract</li> <li>Briefly describe extra pyramidal descending tracts</li> <li>Describe rigidity and</li> <li>spasticity</li> <li>Describe location and function of red nucleus</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02</li> <li>(Chapter 12, Page 237,240)</li> <li>Physiology by Linda S. Costanzo 6th Edition.(Chapter 03. Page 110)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition.</li> <li>Section 09.(Chapter 56, Page 697)</li> <li>https://www.physio-pedia.com/Extrapyramidal_and_Pyramidal_Tracts https://youtu.be/B88BNYWVkWE</li> </ul>
Basal Ganglia & Lesions	<ul> <li>Describe ideation and function of fed functions</li> <li>Describe physiological anatomy of basal ganglia</li> <li>Draw neuronal circuits of basal ganglia</li> <li>Explain the role of neuronal circuits in functioning of basal ganglia</li> <li>Enlist and explain the physiological role of neurotransmitters in basal ganglia system</li> <li>Enumerate the clinical abnormalities caused by damage to basal ganglia</li> <li>Briefly explain Parkinson disease</li> <li>regarding its causes, signs and symptoms &amp; treatment</li> <li>Explain Huntington's Chorea regarding its causes, signs and symptoms</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25TH Edition. Section 02 (Chapter 12, Page 243)</li> <li>Physiology by Linda S. Costanzo 6th Edition.(Chapter 03. Page 110)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13th Edition. (Chapter 69, Page 1194)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14th Edition. Section 09.(Chapter 57, Page 720)</li> <li>https://youtu.be/hxvep2Y8ShI</li> <li>https://www.sciencedirect.com/science/article/pii/S2214</li> </ul>

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https://teachmeanatomy.info/neuroanatomy/structures/b
asal-ganglia/

### **Biochemistry Self-Directed Learning (SDL)**

Topics	Learning objectives	Learning Resources
Chylomicron metabolism	• Describe synthesis of chylomicron, its breakdown and factors affecting it	• Lippincott Biochemistry Chapter. 18 page 253 <u>https://www.ncbi.nlm.nih.gov/books/NBK305896/</u>
HDL & LDL metabolism	<ul> <li>Explain composition functions and clinical significance of LDL &amp; HDL</li> <li>Illustrate mechanism of revise cholesterol synthesis</li> </ul>	<ul> <li>Lippincott Biochemistry Chapter. 18 page 253</li> <li><u>https://www.alilamedicalmedia.com/-/g</u></li> </ul>
Fatty acid oxidation	• Describe steps enzymes energy calculation of Beta oxidation of saturated fatty acid	<ul> <li>Lippincott Biochemistry Chapter. 16 page 213</li> <li><u>https://ninjanerd.org</u></li> </ul>
Synthesis &Interconversion of Ketone Bodies, Regulation of Ketogenesis, Ketolysis	• Explain synthesis and breakdown of ketone bodies and related disorders	<ul> <li>Lippincott Biochemistry Chapter. 27 page 411</li> <li><u>https://youtu.be/GuSqOsm3QV8</u></li> </ul>
Synthesis of Cholesterol and its regulation	• Describe steps regulation and related disorders of cholesterol synthesis	<ul> <li>Lippincott Biochemistry Chapter. 18 page 244</li> <li><u>https://youtu.be/y9zsDFdMvZY</u></li> </ul>

Practical	At The End Of This Skill Lab, Should Be Able To	Learning	Teaching	Assessment
	Illustrate:	Domain	Strategy	Tools
	Identify the microscopic features of ganglia	Р	-	
	Illustrate histological picture of ganglia	C2		
	List two points of identification	C1	01.11.1.1	OGDE
Ganglia	• Correlate with the clinical conditions & cross sections.	C3	Skills lab	VIVA
Gangna	• Understand curative and preventive health care measures.	C3		VI VI X
	• Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	• Read relevant research article.	C3		
	• Identify the microscopic features of peripheral nerve on given histological slide	Р		
	• Illustrate histological picture of peripheral nerve	C2		OSPE
Peripheral nerve	List two points of identification	C1	Skills lab	
	• Correlate with the clinical conditions & cross sections.	C3		VIVA
	• Understand curative and preventive health care measures. C3			
	• Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	Identify histological slide of spinal cord	Р		
	• Illustrate histological picture of spinal cord	C2		
a · · · ·	• List two points of identification	C1		OGDE
Spinal cord	• Correlate with the clinical conditions & cross sections.	C3	Skills lab	OSPE
	• Understand curative and preventive health care measures.	C3		VIVA
	Practice the principles of bioethics.	C3		
	• Apply strategic use of A.I in health care.	C3		
	Read relevant research article.	C3		
	• Identify the microscopic features of cerebellum	Р		OSPE
Cerebellum	Illustrate histological picture of cerebellum	C2	Skills lab	VIVA
	List two points of identification	C1		
	• Correlate with the clinical conditions & cross sections.	C3		

# Histology Practicals Skill Laboratory (SKL)

• Understand curative and preventive health care measures.	C3	
• Practice the principles of bioethics.	C3	
• Apply strategic use of A.I in health care.	C3	
• Read relevant research article.	C3	

### Physiology Practicals Skill Laboratory (SKL)

Practical	At The End Of This Skill Lab, Should Be Able To	Learning	Teaching	Assessment	References
	Illustrate:	Domain	Strategy	Tools	
	Apparatus identification	C1			
	Principle	C1			Practical Notebook of
Examination of sensory	• Procedure	A, P	Skill lab	OSPE	Physiology Second year
nervous system	Precautions	Р			MBBS by Dr Saqib Sohail
	• Recall sensations transmitted by sensory pathways	C1			
	• Recall the effects of lesions of these pathways	C1			
Examination of motor	Apparatus identification	C1			Practical Notebook of
nervous system	Principle	C1	Skill lab	OSPE	Physiology Second year
	• Procedure	A,P			MBBS by Dr Saqib Sohail
	Precautions	Р			
	• Recall descending pathways & their functions	C1			
	• Recall effects of lesions of these pathways	C1			
	Apparatus identification	C1			Practical Notebook of
	Principle	C1			Physiology Second year
Examination of	• Procedure	A,P			MBBS by Dr Saqib Sohail
cerebellar System	Precautions	Р	Skill lab	OSPE	
	• Recall functions of cerebellum & effects of lesions of	C3			
	cerebellum/				
	Apparatus identification	Cl	-		Practical Notebook of
	• Principle	C1	G1 11 1 1	OGDE	Physiology Second year
Ophthalmoscopy	• Procedure	A,P	Skill lab	OSPE	MBBS by Dr Saqıb Sohail
	Precautions	P	-		
	Clinical Correlation	C1			

	Apparatus identification	C1			
	Principle	C1			
Determination of Eye	Procedure	A,P			Practical Notebook of
field	Precautions	Р	Skill lab	OSPE	Physiology Second year
	Clinical Correlation	C3			MBBS by Dr Saqib Sohail
	• Apparatus identification	C1			
	Principle	C1	-		
Recording of body	Procedure		Skill lab		Practical Notebook of
temperature	Precautions	<u>Р</u>		OSPE	Physiology Second year
·····p ········	Record oral axillary & rectal temperature	C1		0.012	MBBS by Dr Saqib Sohail
	Recall abnormalities of body temperature	C1			
	Apparatus identification	C1	-		Practical Notebook of Physiology Second year
Examination of	Principle	C1			
superficial & deep	Procedure	A.P	Skill lab	OSPE	
reflexes	Precautions	P	-		
	Recall reflex arc	C1			MBBS by Dr Saqib Sohail
	Recall effects of UMNL & LMNL on reflexes	C1			
	Apparatus identification	C1			
	Principle	C1			
Examination of 3 <sup>rd</sup> , 4 <sup>th</sup>	Procedure	A,P			Practical Notebook of
& 6 <sup>th</sup> cranial nerves	Precautions	Р	Skill lab	OSPE	Physiology Second year
	• Recall functions & pathways of various cranial nerves	C1			MBBS by Dr Saqib Sohail
	Recall effects of lesions of cranial nerves	C1			
	Apparatus identification	C1			
Examination of 5 <sup>th</sup> , &	Principle	C1			
7 <sup>th</sup> cranial nerves	• Procedure	A,P	Skill lab	OSPE	Practical Notebook of
/ Examination of	Precautions	Р			Physiology Second year
$8^{\text{th}}$ , $9^{\text{th}}$ , 10, $11^{\text{th}}$ , $12^{\text{th}}$	Recall functions & pathways of various cranial nerves	C1			MBBS by Dr Saqib Sohail
cranial nerves	Recall effects of lesions of cranial nerves	C1			

Topic	At The End Of Practical Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Color Test For Sterols	Perform Color test four sterols	Р	Skill Lab	OSPE
Detection of Cholesterol Crystals	Perform cholesterol Crystals Deduction Test.	Р	Skill Lab	OSPE
Estimation of serum TAGS	Perform triglyceride estimation	Р	Skill Lab	OSPE
Estimation of Serum HDL	Perform HDL Estimation	Р	Skill Lab	OSPE
Lipid Solubility & Acrolein test	Perform Lipid Solubility & Acrolein test.	Р	Skill Lab	OSPE

### **Biochemistry Practicals Skill Laboratory (SKL)**

#### **SECTION - III**

### **Basic and Clinical Sciences (Vertical Integration)**

#### Content

- CBLs
- PBLs
- Vertical Integration LGIS

<b>Case Based Learning</b>	<b>Objectives (CBL)</b>
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Subject	Topic       At the End Of Lecture Students Should Be Able To		Learning Domain
	Cystic Astrocytoma of cerebellum	Apply basic knowledge of subject to study clinical case.	C3
Anatomy	• Stroke	Apply basic knowledge of subject to study clinical case.	C3
	• CVA	Apply basic knowledge of subject to study clinical case.	C3
Physiology	Gullain Barr syndrome	Apply basic knowledge of subject to study clinical case.	C3
	• IHD	Apply basic knowledge of subject to study clinical case.	C3
Biochemistry	Respiratory Distress Syndrome	Apply basic knowledge of subject to study clinical case.	C3

### Vertical Integration LGIS Pathology

Topic	At the end of this LGIS students of should be able to:	Learning Domain	Teaching Strategy	Assessment Tool
	• Describe edema ,herniation and hydrocephalous	C2		
Patterns of injury in	Classify cerebrovascular diseases	C2	LGIS	MCQ'S
nervous system	Explain CNS trauma	C2		
	Identify Congenital malformation	C1		
Diseases of myelin and neurodegenerative diseases	<ul> <li>Students should be able to</li> <li>describe the pathophysiology and histomorphology of Alzheimer's disease, Parkinson's Disease, Huntington's disease and Multiple sclerosis</li> </ul>	C2	LGIS	MCQ'S
Meningitis	<ul> <li>Classify types of meningitis</li> <li>Enlist causes of meningitis</li> </ul>	C2 C1	LGIS	MCQ'S
	<ul> <li>Describe rab dragnosis of meningitis</li> <li>Enlist complication of meningitis</li> </ul>	C2 C2		

#### Pharmacology

Topic	At the end of this LGIS students of should be able to:	Learning Domain	Teaching Strategy	Assessment Tool
	• List the major neurotransmitters in the CNS	C1		
Introduction to	• List the major classes of receptors for each of the primary	C1	LOIG	
CNS	neurotransmitters and their associated relevant disorders		LGIS	MCQ
Pharmacology	• Identify the special considerations associated with CNS drug delivery	C1		
	Cite main drug groups acting on the CNS	C1		

#### Medicine

Торіс	At The End Of This Skill Lab, Should Be Able To Illustrate:	Learning Domain	Teaching Strategy	Assessment Tools
Stroke	• Discuss pathophysiology, Blood supply of brain (Anterior and posterior Circulation), which part of brain supplied by various arteries, Physiology of brain pathways (Corticospinal and Corticobulbar pathways), Types of Stroke, clinical features, management	C1 C2	LGIS	MCQs
Spinal Cord and Peripheral Nervous system	• Various types of pathways and cells, Peripheral Nerves and neuromuscular junction, difference between upper and lower motor neurons, various types of Plegias (Paraplegia, Hemiplegia, Quadriplegia), Various types of neuropathies and myasthenia Gravis and discuss pathophysiology	C1 C2	LGIS	MCQs
Cerebellar Disorders	• Brain parts involved in Movement and Co-ordination, how movements are brought about, possible lesions and discuss pathophysiology, types of disorders, clinical features, management	C1 C2	LGIS	MCQs
Meningitis	<ul> <li>Define and discuss pathophysiology and discuss symptoms and signs</li> <li>Discuss the causes</li> <li>Describe the management</li> </ul>	C1 C2 C2	LGIS	MCQs
Epilepsy and other convulsive disorders	<ul> <li>Define and discuss pathophysiology</li> <li>Discuss the causes</li> </ul>	C1 C2	LGIS	MCQs

	• Describe the management	C2		
	• Define and discuss and discuss pathophysiology, symptoms and signs	C1		
Encephalitis	• Discuss the causes	C2	LGIS	MCQs
	• Describe the management	C2		

### Surgery

Topic	At The End Of This LGIS, Second Year MBBS Students Should Be Able To:	Learning Domain	Teaching Strategy	Assessment Tools
	Classify Brain Tumors	C1		
Brain tumors	• Outline clinical features of brain tumors.	C1	LGIS	MCQ
	Approach towards a SOL brain			
	Define Brain Abscess	C1		
Brain abscess	Outline clinical features of brain abscess	C1	LGIS	MCQ
	Define head injury	C1		
	Mechanism of Head injury	C1		
Head injury	Clinical features of head injury	C1	LGIS	MCQ
	Glassgow coma Scale	C1		
Poly trauma	Define polytrauma	C1		
	Describe triage	C1	LGIS	MCQ
Patient	ATLS Protocol	C1		

### **Obstetrics & Gynecology**

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
	• Enumerate common neurological disorders during pregnancy (eclampsia, epilepsy)	C1		
Seizures during	Understand neurological changes leading to eclampsia and epilepsy	C1		
pregnancy(eclampsia/e	• Understand the effects of epilepsy and anti-epileptic drugs on mother and fetus	C1	LGIS	MCQs
pilepsy)	Comprehend the principles of management of epilepsy during pregnancy	C1		

#### **Pediatrics**

Topic	At The End Of This Skill Lab, Should Be Able To Illustrate:	Learning	Teaching	Assessment
		Domain	Strategy	Tools
	Scenario of a patient with fever & fits			
	• Define meningitis.	C1		
	<ul> <li>Discuss Epidemiology &amp;Pathophysiology</li> </ul>	C1		
	• Discuss Etiological organisms at different ages	C1		1100
Meningitis	Discuss Clinical features	C1	LGIS	MCQs
	Discuss Diagnosis & Management	C1		
	Discuss Complications & prognosis	C1		
	Discuss Prevention of meningitis	C1		
	Scenario of a Cerebral Palsy patient			
	• Student will be able to know			
	• Discus Brief anatomy of brain	C2	LGIS	
Cerebral Palsy	Definition of cerebral palsy	C1		
	Discuss Epidemiology	C2		MCQs
	Discuss Etiology	C2		
	Discuss Pathophysiology	C2		
	Discuss Clinical presentation & anatomic classification of	C2		
	Cerebral Palsy			
	Discuss Associated problems	C2		
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	Discuss Management & Prevention	C2		
	• Scenario of a patient with acute flaccid paralysis	C1		
	• Student will be able to know	C1		
	• AFP definition	C1	LGIS	MCQs
Polio	Discuss Etiology & Epidemiology of Polio	C2		
	Discuss Pathogenesis	C2		
	Discuss Clinical features	C2		
	Discuss Management	C2		
	Discuss Complications & sequel	C2		
	Prevention – vaccination	C1		

## Radiology

Practical	At The End Of This Skill Lab, Should Be Able To Illustrate:	Learning Domain	Teaching Strategy	Assessment Tools
	Interprat Normal Skull Radioghraph	C1	LGIS	MCQs
Skull radio graph	<ul> <li>Discuss fractures and other diseases with their clinical</li> </ul>	C2		
	significance			
CT- scan brain	<ul> <li>Interpret normal anatomical structures</li> </ul>	C2	LGIS	MCQs
MRI & CT Scan	<ul> <li>List some indications for contrast enhanced MRI and CT</li> </ul>	C1	LGIS	MCQs
CT scan	• Discriminate between a subdural and epidural hematoma at CT	C2	LGIS	MCQs
	(4) Describe imaging signs of a subarachnoid hemorrhage			

## ENT

Topic	At The End Of This LGIS, Second Year MBBS Students	Learning	Teaching	Assessment
	Should Be Able To:	Domain	Strategy	Tools
Acoustic neuroma	Recognize signs and symptoms of acoustic neuroma	C1	LGIS	MCQs

## Ophthalmology

Торіс	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Chalazion	• Discuss in detail the clinical features and management	C2	LGIS	MCQs
Strabismus	• Discuss in detail the clinical features and management	C2	LGIS	MCQs

Date/Day	Department	Time	Week	Topic Of Lectures	Teachers
29-07-2024	Pharmacology	11:20AM - 12:10 PM	1 <sup>st</sup> Week	Introduction to CNS pharmacology	Dr. Omaima Asif (Even)
Monday	(LGIS)				Dr Arsheen (Odd)
02-08-2024	Pediatrics (LGIS)	08:00AM - 09:00 AM	1 <sup>st</sup> Week	Meningitis	Dr. Mamoona Qudrat (Even)
Friday					Dr. Tanzeela Rani (Odd)
03-08-2024	Pathology (LGIS)	10:30AM - 11:20 AM	1 <sup>st</sup> Week	Introduction to ANS ,Basic	Dr. Nida Fatima (Even)
Saturday				Characteristics of Sympathetic &	
				Parasympathetic System	
				Meningitis	Dr. Kiran Ahmad (Odd)
05-08-2024	Pathology (LGIS)	11:20AM - 12:10 PM	2 <sup>nd</sup> Week	Patterns of injury in nervous system	Dr. Nida Fatima (Even)
Monday					Dr Kiran Ahmad (Odd)
07-08-2024	Surgery (LGIS)	11:20AM - 12:10 PM	2 <sup>nd</sup> Week	Spinal injury and Head injury	Dr. Soban Sarwar Gondal (Even)
Wednesday					Dr. Usman Malik (Odd)
08-08-2024	Radiology (LGIS)	10:30AM – 11:20 AM	2 <sup>nd</sup> Week	Skull Radiograph	Dr Riffat (Even)
Thursday					Dr Saba (Odd)
09-08-2024	Medicine (LGIS)	08:00AM - 09:00 AM	2 <sup>nd</sup> Week	Spinal cord and peripheral nervous	Dr Javeria Malik (Even)
Friday				system	Dr Riffat (Odd)
10-08-2024	Gynecology	11:00AM - 12:10 PM	2 <sup>nd</sup> Week	Seizures during	Dr Ismat Batool (Even)
Saturday	&OBS (LGIS)			pregnancy(eclampsia/epilepsy)	Dr Sadia Waheed (Odd)
17-08-2024	Medicine (LGIS)	11:20AM – 12:10 PM	3 <sup>rd</sup> Week	Cerebellar disorders	Dr Javeria Malik (Even)
Saturday					Dr Faran Maqbool (Odd)
19-08-2024	Surgery (LGIS)	10:30AM – 11:20 AM	4 <sup>th</sup> Week	Management of hydrocephalus	Dr. Fraz Mehmood (Even)
Monday					Dr. Ammad ul Haq (Odd)
19-08-2024	Medicine (LGIS)	11:20AM – 12:10 PM	4 <sup>th</sup> Week	Epilepsy and other convulsive	Dr Javeria Malik (Even)
Monday				disorders	Dr Faran Maqbool (Odd)
21-08-2024	Medicine (LGIS)	11:20AM – 12:10 PM	4 <sup>th</sup> Week	Encephalitis	Dr Javeria Malik (Even)
Wednesday					Dr Faran Maqbool (Odd)
26-08-2024	Medicine (LGIS)	10:30AM – 11:20 AM	5 <sup>th</sup> Week	Stroke	Dr Javeria Malik (Even)
Monday					Dr Faran Maqbool (Odd)
28-08-2024	Radiology	10:30AM - 11:20 AM	5 <sup>th</sup> Week	CT scan and MRI	Dr Anum Zahoor (Even)
Wednesday				(Brain and Spinal Cord)	Dr Faisal (Odd)
28-08-2024	Surgery (LGIS)	11:20AM – 12:10 PM	5 <sup>th</sup> Week	Poly trauma patient	Dr. Fraz Mehmood (Even)
Wednesday					Dr. Ali Tasaddaq (Odd)

## List of CNS Module Vertical Courses Lectures

### **SECTION – IV**

## **Spiral Courses**

#### Content

- Longitudinal Themes
  - The Holy Quran Translation
  - Pak Studies/Islamiyat
  - Family Medicine
  - Behavioral Sciences
  - **o** Biomedical Ethics
  - Early Clinical Exposure (ECE)

#### **Introduction to Spiral Courses**

#### The Holy Quran Translation

A course of Islamic Studies provides students with a comprehensive overview of the fundamental aspects of Islam, its history, beliefs, practices, and influence on society and familiarize students with a solid foundation in understanding the religion of Islam from an academic and cultural perspective. Ethics, in integrated form will shape the core of the course to foster among students the universal ethical values promoted by Islam.

#### Bioethics

Biomedical ethics, also known as bioethics, is a field of study that addresses the ethical, social, and legal issues arising from medicine and the life sciences. It applies moral principles and decision-making frameworks to the practice of clinical medicine, biomedical research, and health policy. Biomedical ethics seeks to navigate the complex ethical dilemmas posed by advances in medical technology, research methodologies, and healthcare practices. Key areas of focus include patient rights and autonomy, confidentiality, informed consent, end-of-life care, resource allocation, and the ethics of genetic engineering, among others.

Biomedical ethics within medical universities plays a pivotal role in shaping the moral framework through which future healthcare professionals navigate the complex and often challenging decisions they will face in their careers. This critical discipline integrates ethical theories and principles with clinical practice, research, and healthcare policy, fostering a deep understanding of the ethical dimensions of medicine. By embedding biomedical ethics into the curriculum, Rawalpindi medical university equips students with the tools to critically analyze and address ethical dilemmas, ranging from patient confidentiality and informed consent to end-of-life care and the equitable distribution of healthcare resources.

This education goes beyond theoretical knowledge, encouraging students to apply ethical reasoning in practical scenarios, thus preparing them for the moral complexities of the medical field. Biomedical ethics also promotes a culture of empathy, respect, and integrity, ensuring that future medical practitioners not only excel in their technical skills but also uphold the highest ethical standards in patient care and research. Through seminars, case studies, and interdisciplinary collaborations, students are encouraged to engage in ethical discourse, reflecting on the societal impact of medical advancements and the responsibility of medical professionals to society. This foundational aspect of medical education cultivates a generation of healthcare professionals committed to ethical excellence, patient advocacy, and the pursuit of equitable healthcare for all.

#### Professionalism

Professionalism in medicine refers to the set of values, behaviors, and relationships that underpin the trust the public has in doctors and other healthcare professionals. It encompasses a commitment to competence, integrity, ethical conduct, accountability, and putting the interests of patients above one's own. Professionalism involves adhering to high standards of practice, including maintaining patient confidentiality, communicating effectively and respectfully with patients and colleagues, and continually engaging in self-improvement and professional development. It also includes a responsibility to improve access to high-quality healthcare and to contribute to the welfare of the community and the

betterment of public health. In essence, professionalism in medicine is foundational to the quality of care provided to patients and is critical for maintaining the trust that is essential for the doctor-patient relationship.

Rawalpindi Medical University emphasizes the importance of professionalism in medicine, integrating it throughout its curriculum to ensure that students embody the core values of respect, accountability, and compassion in their interactions with patients, colleagues, and the community. This focus on professionalism is designed to prepare students for the complexities of the healthcare environment, instilling in them a deep sense of responsibility to their patients, adherence to ethical principles, and a commitment to continuous learning and improvement. Through a combination of theoretical learning, practical training, and mentorship, RMU encourages its students to exemplify professionalism in every aspect of their medical practice. Workshops, seminars, and clinical rotations further reinforce these values, providing students with real-world experiences that highlight the importance of maintaining professional conduct in challenging situations. RMU's approach to professionalism not only shapes competent and ethical medical professionals but also contributes to the broader mission of improving healthcare standards and patient outcomes. By prioritizing professionalism, Rawalpindi Medical University plays a crucial role in advancing the medical profession and ensuring that its graduates are well-equipped to meet the demands of a rapidly evolving healthcare landscape with honor and integrity.

#### Communication Skills

Communication skill for health professionals involves the ability to effectively convey and receive information, thoughts, and feelings with patients, their families, and other healthcare professionals. It encompasses a range of competencies including active listening, clear and compassionate verbal and non-verbal expression, empathy, the ability to explain medical conditions and treatments in an understandable way, and the skill to negotiate and resolve conflicts. Effective communication is essential for establishing trust, ensuring patient understanding and compliance with treatment plans, making informed decisions, and providing holistic care. It directly impacts patient satisfaction, health outcomes, and the overall efficiency of healthcare delivery

At Rawalpindi Medical University (RMU), the development of communication skills is regarded as a fundamental aspect of medical education, recognizing its critical importance in enhancing patient care, teamwork, and interdisciplinary collaboration. RMU is dedicated to equipping its students with exceptional communication abilities, enabling them to effectively interact with patients, their families, and healthcare colleagues. The curriculum is thoughtfully designed to incorporate various interactive and experiential learning opportunities, such as role-playing, patient interviews, and group discussions, which allow students to practice and refine their communication skills in a supportive environment.

By integrating communication skills training throughout its programs, RMU not only enhances the interpersonal competencies of its future healthcare professionals but also contributes to improving the overall quality of healthcare delivery. Graduates from RMU are distinguished not just by their clinical expertise but also by their ability to connect with patients and colleagues, making them highly effective and compassionate practitioners.

#### **Behavioral Sceinces**

Behavioral sciences in medicine focus on understanding and addressing the psychological and social aspects of health and illness. This interdisciplinary field combines insights from psychology, sociology, anthropology, and other disciplines to enhance medical care and patient outcomes. It explores how behavior, emotions, and social factors influence health,

disease, and medical treatment. By incorporating behavioral science principles into medical practice, healthcare professionals can better understand patients' perspectives, improve communication, and promote positive health behaviors, ultimately contributing to more comprehensive and effective patient care.

#### Family Medicine

Family medicine is a medical specialty dedicated to providing comprehensive health care for people of all ages and genders. It is characterized by a long-term, patient-centered approach, building sustained relationships with patients and offering continuous care across all stages of life. It focuses on treating the whole person within the context of the family and the community, emphasizing preventive care, disease management, and health promotion.

The Family Medicine Curriculum at Rawalpindi Medical University (RMU) marks a significant stride towards holistic healthcare education, aiming to prepare medical graduates for the comprehensive and evolving needs of family practice. This curriculum is designed to offer a broad perspective on healthcare, focusing on preventive care, chronic disease management, community health, and the treatment of acute conditions across all ages, genders, and diseases. Emphasizing a patient-centered approach, the curriculum ensures that students develop a deep understanding of the importance of continuity of care, patient advocacy, and the ability to work within diverse community settings.

RMU's Family Medicine Curriculum integrates theoretical knowledge with practical experience. Students are exposed to a variety of learning environments, including community health centers, outpatient clinics, and inpatient settings, providing them with a well-rounded understanding of the different facets of family medicine. This hands-on approach is complemented by interactive sessions, workshops, and seminars that cover a wide range of topics from behavioral health to geriatric care, ensuring students are well-equipped to address the comprehensive health needs of individuals and families.

#### Artificial Intelligence

To realize the dreams and impact of AI requires autonomous systems that learn to make good decisions. Reinforcement learning is one powerful paradigm for doing so, and it is relevant to an enormous range of tasks, including robotics, game playing, consumer modeling and healthcare. This class will provide a solid introduction to the field of reinforcement learning and students will learn about the core challenges and approaches, including generalization and exploration. Through a combination of lectures, and written and coding assignments, students will become well versed in key ideas and techniques for RL. Assignments will include the basics of reinforcement learning as well as deep reinforcement learning — an extremely promising new area that combines deep learning techniques with reinforcement learning. In addition, students will advance their understanding and the field of RL through a final project.

#### Integrated Undergraduate Research Curriculum

The integrated undergraduate research curriculum (IUGRC) of RMU occupies a definite space in schedule of each of the five years in rational and incremental way. It has horizontal harmonization as well as multidisciplinary research work potentials. In the first-year teachings are more introductory & inspirational rather than instructional. The teachings explain what & why of research and what capacities are minimally required to comprehend research & undertake research. Some research dignitaries' lecture are specifically arranged

for sharing their experiences and inspiring the students. Students are specifically assessed through their individual compulsory written feedback (reflection) after the scheduled teachings end.

#### Entrepreneurship

Entrepreneurship is the process of designing, launching, and running a new business, which typically starts as a small enterprise offering a product, process, or service for sale or hire. It involves identifying a market opportunity, gathering resources, developing a business plan, and managing the business's operations, growth, and development.

Entrepreneurship in medical universities represents a burgeoning field where the innovative spirit intersects with healthcare to forge advancements that can transform patient care, medical education, and healthcare delivery. This unique amalgamation of medical expertise and entrepreneurial acumen empowers students, faculty, and alumni to develop groundbreaking medical technologies, healthcare solutions, and startups that address critical challenges in the health sector. By integrating entrepreneurship into the curriculum, Rawalpindi Medical university is not only expanding the traditional scope of medical education but also fostering a culture of innovation and problem-solving. This enables future healthcare professionals to not only excel in clinical skills but also in business strategies, leadership, and innovation management.

Such initiatives often lead to the creation of medical devices, digital health platforms, and therapeutic solutions that can significantly improve patient outcomes and make healthcare more accessible and efficient. Through incubators, accelerators, and partnerships with the industry, medical universities are becoming hotbeds for healthcare innovation, driving economic growth, and contributing to the broader ecosystem of medical research and entrepreneurial success.

#### Digital Literacy Module

Digital literacy means having the skills one needs to live, learn, and work in a society where communication and access to information is increasingly through digital technologies like internet platforms, social media, and mobile devices.

#### Early Clinical Exposure (ECE)

Early clinical exposure helps students understand the relevance of their preclinical studies by providing real-world contexts. This can enhance motivation and engagement by showing students the practical application of their theoretical knowledge. Early exposure allows students to begin developing essential clinical skills from the start of their education. This includes not only technical skills but also crucial soft skills such as communication, empathy, and professionalism. Direct interaction with patients early in their education helps students appreciate the complexities of patient care, including the psychological and social aspects of illness. Early exposure to various specialties can aid students in making informed decisions about their future career paths within medicine.

Early clinical experiences contribute to the development of a professional identity, helping students see themselves as future physicians and understand the responsibilities and ethics associated with the profession. This can help reduce the anxiety associated with clinical work by familiarizing students with the clinical environment. It can build confidence in

their abilities to interact with patients and healthcare professionals. Engaging with real-life clinical situations early on encourages the development of critical thinking and problemsolving skills, which are essential for medical practice. It helps bridge the gap between theoretical knowledge and practical application, leading to a more integrated and holistic approach to medical education. It allows students to observe and understand how healthcare systems operate, including the challenges and limitations faced in different settings.: Early patient interaction emphasizes the importance of patient-centered care from the outset, underscoring the importance of treating patients as individuals with unique needs and backgrounds. Practical experiences can enhance long-term retention of knowledge as students are able to connect theoretical learning with clinical experiences.: Early clinical experiences often involve working in multidisciplinary teams, which fosters a sense of collaboration and understanding of different roles within healthcare.

In summary, early clinical exposure in medical education is pivotal for the holistic development of medical students, providing them with a strong foundation of practical skills, professional attitudes, and a deep understanding of patient-centered care.

#### **Behavioral sciences**

Topic	At The End Of Lecture Students Should Be Able To	Learning	Teaching	Assessment
		Domain	Strategy	Tool
	• To be able to define emotions.	C1		
Emotions	• To understand the neuroanatomy and neurochemistry of emotion way to	C2	LGIS	MCQs
	deal with emotion			
	• To be able to outline the types of memory.	C2		
Memory	• To be able to explain the areas in brain responsible for memory storage	C2	LGIS	MCQs
	and Retrieval			

### **Biomedical Ethics**

Topics	At the end of session students should be able to:	Learning Domains	Teaching Strategy	Assessment Tools
Ethical dilemmas in healthcare practice involving breach in principle of autonomy	<ul> <li>Analyze ethical dilemmas in healthcare practice involving breach in principle of autonomy.</li> <li>Explain what procedures adopted to maintain patient autonomy.</li> <li>Identify situations in which doctor may have to take decisions in the best interest of the patients</li> </ul>	C3 C2 C1	Short video demonstration on violation of Ethical principle of autonomy from suit CBEC Video resources	<ul> <li>Assignment based assessment involving real life case scenarios under aggregate Marks.</li> <li>(Internal Assessment)</li> <li>Assignment to be uploaded on LMS</li> </ul>
Ethical dilemmas in healthcare practice involving breach in principle of beneficence and non-maleficence	<ul> <li>Analyze ethical dilemmas in healthcare practice involving breach in principle of beneficence and non- maleficence</li> <li>Explain what procedures adopted to maintain the principle of beneficence and non-maleficence in challenging situations</li> </ul>	C3 C2 C1	Short video demonstration on violation of Ethical principle of beneficence and non-maleficence from suit CBEC Video resources	• Assignment based assessment involving real life case scenarios under aggregate Marks

	• Identify situations in which a doctor may have to take decisions in the best interests of the patient considering the principle of beneficence and non-maleficence		Students deliberations and reflections Reflective writing	<ul> <li>(Internal Assessment)</li> <li>Assignment to be uploaded on LMS</li> </ul>
Ethical dilemmas practice involving breach in principle of justice	<ul> <li>Analyze ethical dilemmas in healthcare practice involving breach in principle of justice</li> <li>Explain what procedures adopted to maintain the principle of justice in challenging situations</li> <li>Identify situations in which a doctor may have to take decisions in the best interests of the patient considering the principle of justice</li> </ul>	C3 C2 C1	Short video demonstration on violation of Ethical principle of beneficence and non-maleficence from suit CBEC Video resources Students deliberations and reflections Reflective writing	<ul> <li>Assignment based assessment involving real life case scenarios under aggregate Marks</li> <li>(Internal Assessment)</li> <li>Assignment to be uploaded on LMS</li> </ul>

## Family Medicine

Topic	Learning Objectives	Learning	Teaching	Assessment
	At the end of the lecture the student should be able to	Domain	Strategy	1001
	• Describe presenting complains of patients with Headache			
Approach to a patient with	Discuss complications of Headache		LGIS-1	MCQs
	• Describe initial treatment of patients with Headache	C3		
neadache	• Know when to refer patient to consultant/ Hospital			

## Early Clinical Exposure (ECE)

# **Rotation to Department of Medicine**

Session	Learning Objectives	Teaching Strategy
I Cases of stroke	<ul> <li>At the end of the session students will be able to</li> <li>Observe and describe the different types of stroke, including ischemic and hemorrhagic strokes, and explain the pathophysiological changes that occur in the brain as a result of these conditions.</li> <li>Discuss the major risk factors for stroke, such as hypertension, atrial fibrillation, and diabetes, and recognize the early clinical signs and symptoms using the FAST (Face drooping, Arm weakness, Speech difficulties, Time to call emergency services) mnemonic.</li> <li>Describe the initial steps in the management of stroke, including the importance of rapid assessment and intervention, the role of imaging in diagnosis, and the basic treatment strategies for ischemic versus hemorrhagic stroke</li> </ul>	<ul> <li>Bedside Teaching</li> <li>Duration 1 hour</li> <li>Conducted by senior faculty member of unit</li> </ul>
II Paraplegia	<ul> <li>Outline the anatomical structures of the spinal cord and its functional relationship with the body, understanding how injuries or diseases affecting these areas can lead to paraplegia.</li> <li>Discuss the various etiologies of paraplegia, including traumatic spinal cord injury, tumors, infectious diseases, and degenerative disorders, and explain the pathophysiological mechanisms that result in the loss of motor and sensory functions below the level of injury.</li> <li>Describe the initial clinical assessment of a patient with suspected paraplegia, including the importance of a thorough neurological examination and the use of diagnostic imaging. They will also learn about the basic principles of acute management and the multidisciplinary approach needed for long-term rehabilitation.</li> </ul>	<ul> <li>Bedside teaching</li> <li>Duration 1 hour</li> <li>Conducted by senior faculty member of unit</li> </ul>
III	• Define a vegetative state and differentiate it from other conditions affecting consciousness, such as coma and minimally conscious states, based on clinical characteristics and brain activity.	<ul><li>Bedside teaching</li><li>Duration 1 hrs</li></ul>

<ul> <li>Vegetative state</li> <li>Identify and explain the various causes that can lead to a vegetative state, including traumatic brain injury, severe brain hypoxia, and major neurological diseases, and discuss the underlying pathophysiological changes in the brain.</li> <li>Describe assessment techniques used to determine the extent of brain function, the typical medical care provided, and the ethical challenges involved in decisions about long-term care, including discussions on quality of life and end-of-life decisions.</li> </ul>	• Conducted by senior faculty member of unit
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# **Rotation to Department of Surgery/ Neurosurgery**

Session	Learning Objectives	Teaching Strategy
I Head injury	<ul> <li>At the end of the session students will be able to</li> <li>Classify head injuries into major categories such as concussions, contusions, skull fractures, and intracranial hematomas, and understand the mechanisms that typically cause these injuries.</li> <li>Recognize the immediate and delayed signs and symptoms of head injuries, including changes in consciousness, visible head trauma, cognitive impairments, and neurological deficits.</li> <li>Describe the basic pathophysiological changes that occur in the brain following different types of head injuries, such as the cascading effects of brain swelling, the impact of blood-brain barrier disruptions, and neuronal damage.</li> <li>Understand the initial steps in the assessment and management of a patient with a head injury, including maintaining airway, breathing, and circulation, the use of imaging modalities like CT scans to assess internal damage, and the criteria for when to escalate care to neurosurgical interventions.</li> </ul>	<ul> <li>Bedside Teaching</li> <li>Duration 1 hour</li> <li>Conducted by senior faculty member of unit</li> </ul>

II Nerve injuries	<ul> <li>Describe the basic anatomy of peripheral nerves and be able to classify nerve injuries according to severity, using the Sunderland and Seddon classification systems, which categorize injuries based on the extent of damage to nerve fibers and surrounding structures.</li> <li>List the common causes of nerve injuries, including traumatic injuries (such as lacerations and avulsions), compression (from tumors or entrapment syndromes), and iatrogenic injuries (resulting from medical or surgical procedures).</li> <li>Understand how to recognize the clinical manifestations of nerve injuries, such as loss of sensation, motor function, or autonomic dysfunction in the affected area, and how these symptoms correlate with the specific nerve damaged.</li> <li>Discuss the initial steps in the management of nerve injuries, including the importance of a thorough neurological examination, the use of diagnostic tools like electromyography (EMG) and nerve conduction studies, and the principles guiding acute treatment and referral for possible surgical intervention.</li> </ul>	<ul> <li>Bedside teaching</li> <li>Duration 1 hour</li> <li>Conducted by senior faculty member of unit</li> </ul>
	<ul> <li>Define coma as a deep state of unconsciousness and distinguish it from other states such as vegetative state, minimally conscious state, and brain death by understanding the clinical and neurological criteria for each.</li> <li>Explain the underlying pathophysiological mechanisms that can induce coma, including traumatic brain injuries, strokes, brain tumors, infections, and metabolic imbalances. They will also discuss the role of disruptions in the reticular activating system and cerebral cortex in the maintenance of consciousness.</li> <li>Use the Glasgow Coma Scale (GCS) to assess the level of consciousness in a patient, interpreting scores to gauge the severity of the coma and potential outcomes. They will also identify other important clinical signs such as pupillary responses and motor reflexes that help differentiate the cause of coma.</li> <li>Understand the initial diagnostic steps required when assessing a comatose patient, including neuroimaging, blood tests, and possibly lumbar puncture. They will also discuss the basic management principles aimed at preserving life and brain functions.</li> </ul>	<ul> <li>Bedside teaching</li> <li>Duration 1 hrs</li> <li>Conducted by senior faculty member of unit</li> </ul>

## **Rotation to Department of Radiology**

Session Learning Objectives		Teaching Strategy
I CT scan Brain • Normal • Stroke • Hemorrhage • Infarction	<ul> <li>At the end of the session students will be able to</li> <li>Recognize the normal anatomical structures visible on a CT scan of the brain, including the cerebral hemispheres, cerebellum, brainstem, ventricles, and major sulci and gyri. They will also understand the typical appearances of these structures in different slices (axial, coronal, and sagittal).</li> <li>Identify the CT findings associated with ischemic and hemorrhagic strokes, including areas of hypodensity in ischemic stroke and hyper density in hemorrhagic stroke. They will understand the importance of timing in the imaging of stroke for optimal diagnosis and management.</li> <li>Describe the key differences in appearance between brain hemorrhages and infarctions on CT scans. They will be able to describe the characteristics of hemorrhage appearing as a hyperdense area) and infarctions (e.g., loss of cortical definition and the appearance of infarcted areas as hypodense).</li> <li>Interpret CT images in the context of clinical symptoms to make preliminary</li> </ul>	<ul> <li>Bedside Teaching</li> <li>Duration 1 hour</li> <li>Conducted by senior faculty member of unit</li> </ul>

	diagnoses and understand potential management strategies. This objective aims to integrate their radiographic findings with clinical reasoning to enhance their diagnostic acumen.
II Hydrocephalus	<ul> <li>Define hydrocephalus as the abnormal accumulation of cerebrospinal fluid (CSF) within the ventricles of the brain.</li> <li>Distinguish between the types of hydrocephalus, including communicating, non-communicating (obstructive), and ex-vacuo, and understand the mechanisms that lead to each type.</li> <li>Identify the common causes of hydrocephalus, such as congenital malformations, infections, tumors, and traumatic injuries.</li> <li>Discuss the pathophysiological changes that occur, focusing on the dynamics of CSF production, flow, and absorption.</li> <li>Describe the clinical manifestations of hydrocephalus, which may vary by age and the rate of CSF accumulation.</li> <li>Discuss the diagnostic tools used to identify hydrocephalus, primarily imaging techniques such as ultrasound in infants, CT scans, and MRIs.</li> <li>Describe the treatment options available, including surgical interventions like ventriculoperitoneal shunt placement and endoscopic third ventriculostomy.</li> </ul>
III	• Define brain atrophy as the loss of • Bedside teaching
Brain atrophy	neurons and the connections between • Duration 1 hrs them, resulting in decreased brain

	<ul> <li>Conducted by senior faculty member of unit focal atrophy, which affects specific areas of the brain, and generalized atrophy, which involves a reduction in the size of multiple brain regions.</li> <li>Identify the various causes of brain atrophy, including neurodegenerative diseases (such as Alzheimer's disease and Parkinson's disease), traumatic brain injuries, stroke, and infectious diseases.</li> <li>Describe the signs and symptoms of brain atrophy, such as cognitive decline, memory impairment, changes in motor skills, and alterations in behavior or personality, depending on the areas of the brain that are affected.</li> <li>Discuss the role of imaging studies, such as MRI and CT scans, in diagnosing brain atrophy, and how these images can be used to assess the extent and pattern of atrophy.</li> <li>Discuss the management approaches aimed at slowing the progression of symptoms and improving quality of life, including pharmacological treatments and supportive therapies.</li> </ul>
IV Brain Edema	<ul> <li>Define brain edema</li> <li>Distinguish between the two main types of brain edema: cytotoxic edema, which involves fluid buildup within brain cells due to cellular injury, and vasogenic edema,.</li> <li>Identify various causes of brain edema, including traumatic brain injury,</li> <li>Bedside teaching</li> <li>Duration 1 hrs</li> <li>Conducted by senior faculty member of unit</li> </ul>

	<ul> <li>ischemic stroke, infections, tumors, and toxic exposures.</li> <li>Describe the clinical signs and symptoms of brain edema, which may include headache, nausea, vomiting, altered consciousness, and neurological deficits such as weakness or speech disturbances, depending on the severity and location of the edema.</li> <li>Understand the diagnostic techniques used to identify brain edema, primarily imaging studies like CT and MRI scans</li> <li>Discuss the management options available, including medical treatments to reduce swelling (such as corticosteroids and osmotic diuretics), surgical interventions to relieve pressure, and the importance of addressing the underlying cause of the edema</li> </ul>
V Skull/ spine Fractures	<ul> <li>and the importance of addressing the underlying cause of the edema.</li> <li>Classify the types of skull fractures (such as linear, depressed, diastatic, and basilar) and spine fractures (including compression, burst, flexion-distraction, and fracture-dislocation).</li> <li>Describe the Pathophysiology of Skull and Spine Fractures: Students will explore the pathophysiological implications of these fractures, including potential complications such as intracranial hemorrhage from skull fractures and spinal cord injury from spine fractures. They will examine how the location and severity of the fracture</li> </ul>

	<ul> <li>For skull fractures, symptoms may include visible deformities, cerebrospinal fluid leakage from nose or ears, and neurological deficits. For spine fractures, symptoms can include pain, paralysis, loss of sensation, and autonomic dysregulation.</li> <li>Understand the diagnostic procedures used to assess skull and spine fractures, primarily focusing on imaging techniques like X-rays, CT scans, and MRI.</li> <li>Discuss initial management strategies, including stabilization, neurologic assessment, and when to refer for surgical intervention.</li> </ul>	
VI MRI Brain/ Spine	<ul> <li>Describe the fundamental principles of MRI technology, including how magnetic fields and radio waves are used to create detailed images of the brain and spinal structures.</li> <li>Enlist the key indications for using MRI over other imaging modalities, such as its superior ability to differentiate between soft tissues and its usefulness in diagnosing conditions like tumors, inflammatory diseases, and vascular anomalies.</li> <li>Recognize normal anatomical structures of the brain and spine on MRI scans.</li> <li>Identify common pathological findings, such as signs of herniated discs, spinal stenosis, brain tumors, multiple sclerosis plaques, and evidence of acute or chronic</li> </ul>	<ul> <li>Bedside teaching</li> <li>Duration 1 hrs Conducted by senior faculty member of unit</li> </ul>

• Develop skills in interpreting MRI features that are specific to neurological conditions,	
• Describe the safety considerations associated with MRI, including the importance of screening for contraindications like implanted metallic devices.	

Date/Day	Department	Time	Week	Topic Of Lectures	Teachers
02-08-2024	Quran Translation	10:00AM - 11:00 AM	1 <sup>st</sup> Week	Imaniyaat-5	Mufti Naeem Sherazi (Odd)
Friday					
02-08-2024	Quran Translation	11:00AM – 12:00 PM	1 <sup>st</sup> Week	Imaniyaat-6	Mufti Naeem Sherazi (Even)
Friday			-		
09-08-2024	Quran Translation	10:00AM - 11:00 AM	2 <sup>nd</sup> Week	Musawat	Mufti Naeem Sherazi (Even)
Friday				Tehreek-e-Pakistan	Qari Aman Ullah (Odd)
				(1940-1947	
09-08-2024	Quran Translation	11:00AM – 12:00 PM	2 <sup>nd</sup> Week	Tehreek-e-Pakistan	Qari Aman Ullah (Even)
Friday				(1940-1947	
				Musawat	Mufti Naem Sherazi (Odd)
16-08-2024	Pakstudies/Islamm	10:00AM - 11:00 AM	3 <sup>rd</sup> Week	Khwateen k hakook	Mufti Naem Sherazi (Odd)
Friday	iyat			Qayam e Pakistan,	Qari Aman Ullah (Even)
				ibtidaimushkilaat	
16-08-2024	Pakstudies/Islamm	11:00AM – 12:00 PM	3 <sup>rd</sup> Week	Qayam e Pakistan,	Qari Aman Ullah (Even)
Friday	iyat			ibtidaimushkilaat	
			4	Khwateen k hakook	Mufti Naem Sherazi (Odd)
26-08-2024	Family Medicine	11:20AM – 12:10 PM	5 <sup>th</sup> Week	Approach to a	Dr. Sadia
Monday	(LGIS)			patient with	
27.00.2024			eth TTT 1	neuronal disease	
27-08-2024	Behavioral	11:20AM – 12:10 PM	5 <sup>th</sup> Week	Memory &	Dr. M. Azeem Rao (Even)
Tuesday	Sciences (LGIS)		_th	Emotions	Dr. Zarnain Umar (Odd)
29-08-2024	Behavioral	11:20AM – 12:10 PM	5 <sup>th</sup> Week	Metacognition	Dr. Zarnain Umar (Even)
Thursday	Sciences (LGIS)				Dr. Ali Tasaddaq (Odd)
30-08-2024	Quran Translation	08:00AM - 09:00 AM	5 <sup>th</sup> Week	Momalat-I	Mufti Naeem Sherazi (Odd)
Friday	IV				
	Quran Translation V	09:00AM - 10:00 AM		Momalat-II	Mufti Naeem Sherazi (Even)

# List of CNS Module Spiral Courses Lectures

### **SECTION - V**

### **Assessment Policies**

#### Contents

- Assessment plan
- Types of Assessment:
- Modular Examinations
- Block Examination
- Table 4: Assessment Frequency & Time in CNS Module



Gauge for	Continuous	Internal	Assessment (CIA)	
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Red Zone	High Alert	Yellow Zone	Green Zone	Excellent	Extra Ordinary
0 - 25%	26 - *50%	51 - 60%	61 - 70%	71-80%	81 - 100%

60% and above is passing marks.

#### Gauge for attendance percentage

Red Zone	High Alert	Yellow Zone-1	Yellow Zone-2	Green Zone	Excellent
0 - 25%	26 - 50%	51 - 60%	61 - 74%	*75-80%	81 - 100%

90% is eligibility criteria for appearing professional examination.

#### Assessment plan

University has followed the guidelines of Pakistan Medical and Dental Council for assessment. Assessment is conducted at the mid modular, modular and block levels.

### **Types of Assessment:**

The assessment is formative and summative.

Formative Assessment	Summative Assessment
Formative assessment is taken at modular (2/3 <sup>rd</sup> of the module is complete)	Summative assessment is taken at the mid modular (LMS Based), modular
level through MS Teams. Tool for this assessment is best choice questions	and block levels.
and all subjects are given theshare according to their hour percentage.	

### **Modular Assessment**

Theory Paper	Viva Voce
There is a module examination at the end of first module of each block. The content of the whole teaching of the module are tested in this examination.	Structured table viva voce is conducted including the practical content of the module.
It consists of paper with objective type questions and structured essay questions. The distribution of the questions is based on the Table of Specifications of the module. (Annexure I attached)	

### **Block Assessment**

On completion of a block which consists of two modules, there is a block examination which consists of one theory paper and a structured viva with OSPE.

Theory Paper	Block OSPE
There is one written paper for each subject. The paper consists of objective type questions and structured essay questions. The distribution of the questions is based on the Table of Specifications of the module.	This covers the practical content of the whole block.

# Table 4-Assessment Frequency & Time in CNS Module

		Module – 1	Type of	Total Assessments Time		No. of Assessments		
Block	Sr #	CNS Module Components	Assessments	Assessment	Summative	Formative		
				Time	Assessment	Assessment		
					Time	Time		
	1	Weekly LMS Based Assessments (Anatomy,	Formative	2 Hours				
		Physiology & Biochemistry)						
	2	End Module Examinations (SEQ, SAQ, EMQ &	Summative	2 Hours				
		MCQs Based)			3 Hours 45	3 Hours	2 Formative	6 Summative
II-:	3	Audio Visual (AV) OSPE (10 slides)	Summative	50 Minutes	Minutes			
ock		5 minutes per slide						
Blo	4	Anatomy Structured and Clinically Oriented Viva	Summative	10 Minutes				
	5	Physiology Structured & Clinically oriented Viva	Summative	10 Minutes				
		voce						
	6	Assessment of Clinical Lectures & Spiral	Formative	60 Minutes	1			
		Curriculums						

# Learning Resources

Subject	Resources					
	A. Neuroanatomy					
	1. Snell's Clinical Neuroanatomy by Rayan Splittgerber 9th Edition.					
	B. Gross Anatomy					
	2. Gray's Anatomy By Prof. Susan Standring 42th Edition, Elsevier.					
<ol> <li>Clinical Anatomy For Medical Students By Richard S.Snell 10<sup>th</sup> Edition.</li> <li>Clinically Oriented Anatomy By Keith Moore 9<sup>th</sup> Edition.</li> </ol>						
	C. Histology					
	1. B. Young J. W. Health Wheather's Functional Histology 6 <sup>th</sup> Edition.					
	2. Medical Histology By Prof. Laiq Hussain 7 <sup>th</sup> Edition.					
	D. Embryology					
	1. Keith L. Moore. The Developing Human 11 <sup>th</sup> Edition.					
	2. Langman's Medical Embryology 14 <sup>th</sup> Edition.					
Anatomy	E. YouTube Links					
	6. <u>https://www.youtube.com/watch?v=auogbJFitml&amp;pp=ygUSY25zIGFuYXRvbXkgdmlkZW9z</u>					
	8 https://www.youtube.com/watch?y=a8NtmDrb_ao&pp-yaLILY25zIGFuYXRybXk%3D					
	9 https://www.youtube.com/watch?v=ADAOsuaOSCk&list=PLTF9h-					
	T1TcJgx3OFachdiHPMX6VE4VDS1					
	F. HEC Digital Library Links					
	10. https://link.springer.com/chapter/10.1007/978-981-15-7771-0_3					
	11. https://link.springer.com/chapter/10.1007/978-1-4684-7688-0_7					
	12. https://link.springer.com/chapter/10.1007/978-1-61779-779-8 13					
	13. https://link.springer.com/chapter/10.1007/978-3-319-60187-8_8					
	14. https://link.springer.com/article/10.1007/s00701-013-1937-0					
	15. https://link.springer.com/article/10.1007/BF00344224					
	G. Journal Links					
	1. https://www.tandfonline.com/doi/abs/10.3109/02688699308995089					
	2. <u>https://www.tandfonline.com/doi/full/10.1080/10255840701492118</u>					
	3. <u>https://link.springer.com/referenceworkentry/10.1007/978-3-540-29678-2_1315</u>					
	1. https://link.springer.com/book/10.1007/978-1-4615-1235-6					

	A. Textbooks						
	1. Textbook Of Medical Physiology by Guyton And Hall.14th edition						
	2. Ganong's Review of Medical Physiology.25TH Edition						
	B. Reference books						
	1. Human Physiology by Lauralee Sherwood 10 <sup>th</sup> edition.						
	2. Human Physiology by Dee Unglaub Silver thorn. 8TH Edition.						
	3. Best & Taylor Physiological Basis of Medical Practice 13th edition.						
	4. Berne & Levy Physiology 7th edition.						
	C. Internet References						
	1. https://www.ncbi.nlm.nih.gov/books/NBK539861/						
	2. https://teachmephysiology.com/nervous-system/sensory-system/pain-pathways/						
	3. https://www.osmosis.org/learn/Somatosensory_pathways						
	4. https://www.kenhub.com/en/library/anatomy/autonomic-nervous-system						
Physiology	5. https://www.diffen.com/difference/Parasympathetic_nervous_system_vs_Sympathetic_nervous_system						
	D. HEC Library						
	1. https://www.sciencedirect.com/topics/neuroscience/synaptic-transmission						
	2. https://nba.uth.tmc.edu/neuroscience/m/s2/chapter04.html						
	3. https://www.sciencedirect.com/topics/neuroscience/blood-cerebrospinal-fluid-barrier						
	4. https://www.sciencedirect.com/science/article/abs/pii/S0021992422000892						
	E. Youtube links						
	1. https://youtu.be/AG7Ev2hJGFk						
	2. https://youtu.be/cZwb8zqAPXc						
	3. https://youtu.be/5c8maFAhqIc						
	4. https://youtu.be/432AD7JZnKE						
	5. https://youtu.be/j9pUItHAAhs						
	6. https://youtu.be/7pGKa-1tSJw						
	7. https://youtu.be/gBOAYgMxq-Q						
	8. https://youtu.be/DPHoTIcFfLs						
	F. Journal of Physiology						
	1. https://www.sciencedirect.com/science/article/abs/pii/S0021992422000892						
	2. https://www.sciencedirect.com/topics/psychology/learning-and-memory						
	3. https://www.physio-pedia.com/Reticular_Formation						
	4. https://www.sciencedirect.com/science/article/pii/S2214751923000026						

	A. Textbooks		
	1. Harper's Illustrated Biochemistry 32th edition.		
	2. Lippincott's Illustrated Biochemistry 32th edition.		
	3. Lehninger Principle of Biochemistry 8 <sup>th</sup> edition.		
Biochemistry	4 Biochemistry by Devlin 7 <sup>th</sup> edition.		
	B. Website		
	1. <u>https://www.alilamedicalmedia.com/-/g</u>		
	2. https://ninjanerd.org		
	C. Youtube		
	• <u>https://youtu.be/GuSqOsm3QV8</u>		
	<ul> <li>https://youtu.be/y9zsDFdMvZY</li> </ul>		
	D. HEC Library and Journals		
	https://www.ncbi.nlm.nih.gov/books/NBK305896/		

# **SECTION - VI**

**Time Table** 

# **Clinically Oriented Integrated Modular Curriculum for Second Year MBBS**

CNS Time Table
Second Year MBBS
Session 2023 - 2024
Batch- 50

# **CNS Module Team**

Module Name	:	CNS Module
Duration of module	:	06 Weeks
Coordinator	:	Dr. Arsalan Manzoor Mughal
Co-coordinator	:	Dr. Gaiti Ara
Reviewed by	:	Module Committee

Module Committee				Module Task Force Team		
1.	Vice Chancellor RMU	Prof. Dr. Muhammad Umar	1.	Coordinator	Dr. Arsalan Manzoor Mughal (Associate Professor of	
					Anatomy)	
2.	Director DME	Prof. Dr. Ifra Saeed	2.	DME Focal Person	Dr. Farzana Fatima	
3.	Chairperson Anatomy & Dean Basic	Prof. Dr. Ayesha Yousaf	3.	Co-coordinator	Dr. Gaiti Aara ((APWMO of Anatomy)	
	Sciences					
4.	Chairperson Physiology	Prof. Dr. Samia Sarwar	4.	Co-Coordinator	Dr. Rahat (Senior Demonstrator of Biochemistry)	
5.	Chairperson Biochemistry	Dr. Aneela Jamil	5.	Co-coordinator	Dr. Shazia (Senior Demonstrator of Physiology)	
6.	Focal Person Anatomy Second Year	Dr. Maria Tasleem				
	MBBS					
7.	Focal Person Physiology	Dr. Sidra Hamid		DI	ME Implementation Team	
			1.	Director DME	Prof. Dr. Ifra Saeed	
8.	Focal Person Biochemistry	Dr. Aneela Jamil	2.	Assistant Director DME	Dr Farzana Fatima	
9.	Focal Person Pharmacology	Dr. Zunera Hakim	3.	DME Implementation Team	Prof. Dr. Ifra Saeed	
					Dr. Farzana Fatima	
					Dr. Saira Aijaz	
10.	Focal Person Pathology	Dr. Asiya Niazi	4.	Editor	Muhammad Arslan Aslam	
11.	Focal Person Behavioral Sciences	Dr. Saadia Yasir				
12.	Focal Person Community Medicine	Dr. Afifa Kulsoom				
13.	Focal Person Quran Translation	Dr. Uzma Zafar				
	Lectures					
14.	Focal Person Family Medicine	Dr. Sadia Khan				

Subjects	Embryology	Histology	General Anatomy	Gross Anatomy
• Anatomy	<ul> <li>Early CNS Development</li> <li>Spinal Cord</li> <li>Hindbrain &amp; Cerebellum</li> <li>Midbrain</li> <li>Forebrain</li> <li>Peripheral Nervous System</li> </ul>	<ul> <li>Ganglia</li> <li>Peripheral Nerves</li> <li>Spinal Cord</li> <li>Cerebellum</li> <li>Cerebrum</li> </ul>	<ul> <li>General Anatomy of Nervous System</li> <li>General Anatomy of Autonomic Nervous System.</li> </ul>	<ul> <li>Anterior, Middle &amp; Posterior cranial fossae</li> <li>Meninges, Dural venous sinuses, and intracranial hemorrhages</li> <li>Spinal cord &amp; Tracts</li> <li>Brain stem (Medulla oblongata, Pons, cerebellum &amp; Midbrain)</li> <li>Diencephalon</li> <li>Cerebrum</li> <li>CSF and Ventricular System</li> <li>Cranial nerves</li> <li>Basal ganglia</li> <li>Limbic system &amp; Reticular formation</li> <li>Blood Supply of Brain</li> <li>Radiological Imaging of CNS</li> <li>Cross Sectional Anatomy of CNS</li> </ul>
• Biochemistry	<ul> <li>Fatty acid metabolism</li> <li>Cholesterol Metabolism</li> <li>Ketone bodies metabolism</li> <li>Lipoproteins and Phospho</li> <li>Fatty Liver and hyper Lipi</li> <li>Glycerophospholipid &amp; Space</li> </ul>	l lipids demias. bhimgo phospholipid		
Physiology	<ul> <li>Organization of nervous system, Mechanism of synaptic transmission</li> <li>Classification of sensory receptors, Properties of sensory receptors</li> <li>Properties of synaptic transmission</li> <li>Physiology of pain, Dual pathway for transmission of pain, Analgesia System and Thermal sensations</li> <li>Sensory pathways for transmitting somatic signals</li> <li>Introduction to autonomic nervous system Basic Characteristics of sympathetic &amp; parasympathetic function</li> <li>Somatosensory cortex &amp; lesions of Somatosensory cortex</li> <li>Excitatory &amp; inhibitory effects of sympathetic &amp; parasympathetic stimulation</li> <li>CSF, Blood brain barrier, Blood CSF Barrier, Lumber puncture</li> </ul>			

# **Discipline Wise Details of Modular Contents**

	<ul> <li>Concept of Association areas,</li> <li>Concept of Dominant and non-dominant cerebral hemispheres</li> <li>Limbic system,</li> <li>Functions of hypothalamus</li> <li>Speech and aphasia</li> <li>Learning and memory</li> <li>Reticular activating system and sleep</li> <li>EEG and epilepsy</li> <li>Introduction to motor nervous system &amp; Reflex action, Conditioned reflexes &amp; Properties of reflex action, Control of spinal cord reflexes by higher centers</li> <li>Introduction to cerebellum, Neuronal circuits of cerebellum, and its motor functions</li> <li>Muscle spindle &amp; Golgi tendon organ, Role of muscle spindle and Golgi tendon organ in voluntary motor activity</li> </ul>
• The Holy Quran Translation	<ul> <li>Imaniyaat-5</li> <li>Imaniyaat-6</li> <li>Momalat-I</li> <li>Momalat-II</li> </ul>
Pak Studies / Islammiyat	<ul> <li>Musawat</li> <li>Tehreek-e-Pakistan (1940-1947)</li> <li>Khwateen k hakook</li> <li>Qayam e Pakistan, Ibtidai Mushkilaat</li> </ul>
Bioethics &     Professionalism	<ul> <li>Ethical dilemmas in healthcare practice involving breach in principle of autonomy</li> <li>Ethical dilemmas in healthcare practice involving breach in principle of beneficence and non-maleficence</li> <li>Ethical dilemmas practice involving breach in principle of justice</li> </ul>
Radiology & Artificial Intelligence	<ul> <li>Skull radiograph</li> <li>CT Scan &amp; MRI</li> </ul>
Family Medicine     Behavioral Sciences	<ul> <li>Approach to a patient with headache</li> <li>Emotions</li> <li>Memory</li> </ul>
	Vertical Integration
Pharmacology     Pathology	<ul> <li>Introduction to CNS</li> <li>Patterns of injury in nervous system</li> <li>Meningitis</li> </ul>
Pediatrics	• Meningitis

	Cerebral palsy, Polio					
• Surgery	• Spinal injury and head injury					
	Management of hydrocephalus					
	Brain abscess					
Polytrauma patient						
Medicine	Spinal cord and peripheral nervous system					
	• Encephalitis					
	Cerebellar disorders					
	• Epilepsy and other convulsive disorders					
	• Stroke					
Gynecology & Obs	Seizures during pregnancy (eclampsia/ epilepsy)					
	Early Clinical Exposure					
Medicine	Cases of stroke					
	• Paraplegia					
	Vegetative state					
• Surgery/ Neurosurgery	• Head injury.					
	Nerve injuries					
Radiology	• CT scan					
	• Brain					
	• Normal					
	• Stroke					
	• Hemorrhage					
Infarction Hydrocephalus						
	Brain atrophy					
	Brain Edema					
	Skull/ spine Fractures					
	MRI Brain/ Spine					

# **Categorization of Modular Contents**

Anatomy

Special EmbryologySpecial HistologyGeneral AnatomyDemonstrations / SGDCBLPractical'sSelf-Directed Lear (SDL)• Early CNS Development • Spinal Cord• Ganglia • Peripheral Nerves• General Anatomy of Nervous System • General Anatomy• Anterior, Middle & Posterior cranial fossae• Cystic Astrocytoma of cerebellum• Ganglia • Peripheral Nerves• Anterior, Middle & Posterior cranial fossae	Category A*
<ul> <li>Early CNS</li> <li>Ganglia</li> <li>General Anatomy of Nervous System</li> <li>Spinal Cord</li> <li>General Anatomy of Nervos</li> <li>General Anatomy of Nervous System</li> <li>General Anatomy of Nervous System</li> <li>Anterior, Middle &amp; Posterior cranial fossae</li> <li>Cystic</li> <li>Ganglia</li> <li>Ganglia</li> <li>Anterior, Middle &amp; Posterior cranial of cerebellum</li> <li>Main Dack</li> <li>Ganglia</li> <li>Anterior, Middle &amp; Posterior cranial of cerebellum</li> <li>Main Dack</li> </ul>	Special Embryology
<ul> <li>Hundbrain &amp; Spinal Cord of Autonomic Cerebellum</li> <li>Midbrain</li> <li>Cerebellum</li> <li>Cerebellum</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Cerebulum &amp; Nervous System</li> <li>Spinal cord &amp; Tracts</li> <li>Spinal cord &amp; Tracts</li> <li>Spinal cord &amp; Tracts</li> <li>Brain stem (Medulla oblongata, Pons, cerebellum &amp; Midbrain)</li> <li>Diencephalon</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Diencephalon</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Cerebrum</li> <li>Spinal cord &amp; Tracts</li> <li>Brain stem (Medulla oblongata, Pons, cerebellum &amp; Midbrain)</li> <li>Diencephalon</li> <li>Cerebrum</li> <li>CSF and Ventricular System</li> <li>Cranial nerves</li> <li>Basal ganglia</li> <li>Limbic system &amp; Reticular formation</li> <li>Blood Supply of Brain</li> <li>Radiological Imaging of CNS</li> <li>Cross Sectional Anatomy</li> </ul>	<ul> <li>Early CNS Development</li> <li>Spinal Cord</li> <li>Hindbrain &amp; Cerebellum</li> <li>Midbrain</li> <li>Forebrain</li> <li>Peripheral Nervous System</li> <li>Development of Cranium</li> </ul>

Category B\*\*: By Associate & Assistant Professors

Category C\*\*\*: By Senior Demonstrators & Demonstrators

# **Teaching Staff / Human Resource of Department of Anatomy**

Sr. #	Designation Of Teaching Staff / Human Resource	Total number of teaching staff
1.	Professor of Anatomy Department	03
2.	Associate professor Of Physiology Department	02
	Assistant professor of Anatomy Department (AP)	01
3.	Demonstrators of Anatomy Department	04

## **Contact Hours (Faculty)**

Sr. #	Hours Calculation for Various Type of Teaching	Total Hours
	Strategies	
1.	Large Group Interactive Session (LGIS)	11*2 = 22 hours
2.	Small Group Discussions (SGD)	22*2= 44 hours
3.	Practical / Skill Lab	7.5*5= 37.5 hours

## **Contact Hours (Students)**

<b>Sr.</b> #	Hours Calculation for Various Type of Teaching	Total Hours
	Strategies	
1.	Large Group Interactive Session (LGIS)	1*11 = 11 hours
2.	Small Group Discussions (SGD)	2*22= 44 hours
3.	Practical / Skill Lab	1.5 *5 = 7.5 hours
4.	Self-Directed Learning (SDL)	2*10 = 20 hours
# Physiology

Category A & B*		Category C***	
LGIS	PBL CB	Practical's SGD	SDL
<ul> <li>Organization of nervous system, Mechanism of synaptic transmission</li> <li>Classification of sensory receptors, Properties of sensory receptors</li> <li>Properties of synaptic transmission</li> <li>Physiology of pain, Dual pathway for transmission of pain, Analgesia System and Thermal sensations</li> <li>Sensory pathways for transmitting somatic signals</li> <li>Introduction to autonomic nervous system Basic Characteristics of sympathetic &amp; parasympathetic function</li> <li>Somatosensory cortex &amp; lesions of Somatosensory cortex</li> <li>Excitatory &amp; inhibitory effects of sympathetic &amp; parasympathetic stimulation</li> <li>CSF, Blood brain barrier, Blood CSF Barrier, Lumber puncture</li> <li>Concept of Association areas,</li> <li>Concept of Dominant and non-dominant cerebral hemispheres</li> <li>Limbic system,</li> <li>Functions of hypothalamus</li> <li>Speech and aphasia</li> <li>Learning and memory</li> <li>Reticular activating system and sleep</li> <li>EEG and epilepsy</li> <li>Introduction to motor nervous system &amp; Reflex action,Conditioned reflexes &amp; Properties of</li> </ul>	1. CVA 2. Gullain Bar syndrome	1.Examination of sensory nervous system1.Synapse & sensory Receptors2.Examination of Motor System2.Autonomic Nervous System3.Examination of 	<ul> <li>On Campus: <ol> <li>Sensory pathways for transmitting somatic signals</li> <li>Somatosensory cortex &amp; lesions of Somatosensory cortex</li> <li>Introduction to autonomic nervous system Basic Characteristics of sympathetic &amp; parasympathetic function</li> <li>Excitatory &amp; inhibitory effects of sympathetic &amp; parasympathetic</li> <li>stimulation</li> <li>CSF, Blood brain barrier, Blood CSF Barrier, Lumber puncture</li> <li>Limbic system,</li> <li>Functions of hypothalamus</li> </ol> </li> <li>Online: <ol> <li>Learning and memory</li> <li>Concept of Association areas, Concept of Dominant and nondominant cerebral hemispheres</li> <li>Speech and aphasia</li> <li>EEG and epilepsy</li> <li>Reticular activating system and sleep</li> <li>Muscle spindle &amp; Golgi tendon organ, Role of muscle spindle and</li> <li>Golgi tendon organ in voluntary motor activity</li> <li>Motor cortex &amp; physiological importance of neocortex,</li> </ol> </li> </ul>

reflex action, Control of spinal cord reflexes by	18. Corticospinal or pyramidal tract,
higher centers	Extra pyramidal system
• Introduction to cerebellum, Neuronal circuits of	19. Basal Ganglia & Lesions
cerebellum,	Off Campus:
and its motor functions	1. Organization of nervous
• Muscle spindle & Golgi tendon organ, Role of	system
muscle spindle and Golgi tendon organ in	2. Classification of sensory
voluntary motor activity	receptors
Manifestations of cerebellar disease	3. Sensory pathways for
<ul> <li>Polysynaptic reflexes &amp; Transection of spinal</li> </ul>	transmitting somatic signals
cord	4. Physiology of pain, Dual
Role of brain stem in controlling motor	5. pathway for
functions & Lesions of motor system	6. transmission of pain,
• Motor cortex & physiclegical importance of	7. CSF, Blood brain barrier,
• Motor cortex & physiological importance of	Blood CSF Barrier,
Extra pyramidal system	8. Lumber puncture
Desal Canalia & Lesions	9. Muscle spindle &
• Dasar Gangira & Lesions	10. Golgi tendon organ,
	11. Hypothalamus
	12. Properties of reflex
	13. action, Control of spinal cord
	14. reflexes by higher centers
	15. Reticular activating system
	16. and sleep, EEG and epilepsy
	17. Introduction to cerebellum,
	18. Neuronal circuits of
	cerebellum
	19. Basal Ganglia & Lesions
Category A*: By Professors	19. Dasal Gangna & Lesions

Category B\*\*: By Associate & Assistant Professors

Category C\*\*\*: By Senior Demonstrators & Demonstrators

# **Teaching Staff / Human Resource of Department of Physiology**

Sr. #	Designation Of Teaching Staff /	Total number ofteaching staff
	HumanResource	
1.	Professor of physiology department	01
2.	Associate professor of physiology department	01
3.	Assistant professor of physiology department (AP)	01
4.	Demonstrators of physiology department	07
5.	Residents of physiology department (PGTs)	08

## Contact Hours (Faculty) & Contact Hours (Students)

Sr. #	Hours Calculation for Various Type of Teaching	Total Hours
	Strategies	
1.	Large Group Interactive Session (LECTURES)	$1 \ge 22 = 22 \ge 1$ hour = 22 hours
2.	Small Group Discussions (SGD)/CBL	25 x 1.5 hour = 37.5+2= 39.5 hours
3.	Problem Based Learning (PBL)	
4.	Practical / Skill Lab	25 x 1.5 hour = 37.5 hours
5.	Self-Directed Learning (SDL)	oncampus14 x 1 hour = 14 hours
		off campus $11x1 = 11$ hours

## Biochemistry

Category A & B			Category C***	
LGIS	PBL	CBL	Practical's	SGD
Triglyceride Metabolism, Fatty acid transport		• IHD	• Color Test for Sterols	• Triglycerides & F.A.
Oxidation of fatty acid		Respiratory Distress	• Detection of Cholesterol	oxidation
Oxidation of fatty acid		Syndrome	Crystals	• Fatty acid synthesis &
• Fatty acid synthesis			• Estimation of serum	cholesterol metabolism
Cholesterol Synthesis			TAGS	Ketone bodies &
Plasma Cholesterol level			• Estimation of Serum HDL	Phospholipids
Ketone bodies metabolism			Lipid Solubility &	• Lipoprotein (HDL)
Biosynthesis of Glycerophospholipid			Acrolein test	• Lipoprotein (VLDL, LDL)
Biosynthesis of sphingophospholipids				
Introduction to Lipoproteins				
• LDL& HDL				
Disorders of lipoprotein metabolism				
• Fatty liver & Adipose tissues				
Disorders of lipoprotein metabolism				
*: Assistant Professor (HOD) and APMO (With Postgraduate	Qualification)			
Category B**: (Senior Demonstrators & APWMO)				
Category C***: (By All Demonstrators, Senior Demonstrators	and APWMO)			

# **Teaching Staff / Human Resource of Department of Biochemistry**

Sr. #	<b>Designation Of Teaching Staff / Human Resource</b>	Total number of teaching staff
1	Assistant professor of biochemistry department (AP)	01
2	Demonstrators of biochemistry department	06

## Contact Hours (Faculty) & Contact Hours (Students)

	Hours Calculation for Various Type of	Total Hours	<b>Total Hours</b>
Sr. #	<b>Teaching Strategies</b>	(Faculty)	(student)
1.	Large Group Interactive Session (Lectures)	2 * 5 = 10 hours	05
2.	Small Group Discussions (SGD)	7.5 * 7 = 37.5 hours	7.5
3.	Problem Based Learning (PBL)	2*1=2 hours	2
4.	Practical / Skill Lab	7.5 * 5 = 37.5 hours	7.5
5.	Self-Directed Learning (SDL)		05

					Second Year Tim (29-	etable f 07-2024	or CNS Modu To 03-08-202	ule (First W 24)	eek)					
Date/Day	8:00am-	9:20am	9:	20am – 10	:10am	10:10am – 10:30am	10:30am-	·11:20am	11:20	am-12:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments	
29-07-2024 Monday	<b>Practical &amp;</b> Topics & Venue I en	<b>CBL/SGD</b> Mentioned at the d	PHY Organization of nervous Mechanism of syna transmission Dr. Faizania (Even)	SIOLOGY system, ptic	Y (LGIS) Classification of sensory receptors &Properties of sensory receptors ProfDr. Samia / Dr. Kamil(Odd)		ANATOM General Anatomy Nervous system Assoc. Prof. Dr. Arsa Manzoor (Even)	IY (LGIS) Embryology Early development of CNS alan Prof. Dr. Ifra Saeed (Odd)	-	SDL		SGD / DISSECTION Anterior and Middle Cranial Fossa	SDL Physiology Organization of nervous system, Mechanism of synaptic transmission	
			PHYSIOLOG		SIOLOGY (LGIS)		ANATOM	IY (LGIS)	PBL 1	(SESSION-I)		SGD / DISSECTION		
30-07-2024 Tuesday	Practical & Topics & Venue I	<b>CBL/SGD</b> Mentioned at the	Classification of sensory re &Properties of sensory re	Classification of sensory receptors &Properties of sensory receptors     Organization of nervous system, Mechanism of synaptic transmission     Embryology Early development of CNS     General anatomy Nervous system     PBL Team			Posterior cranial fossa	SDL Physiology Classification of						
	end Prof. Dr. Sami Sarwar/ Dr. Kam (Even)		r. Kamil	Dr. Fazania(Odd)	k	Prof. Dr. Ifra Ass Saeed (Even)	soc. Prof .Dr. Arsalan Manzoor (Odd)			k		sensory receptors		
			РНҮ	SIOLOGY	Y (LGIS)	6 a	ANATOM	IY (LGIS)	BIOCHE	MISTRY (LGIS)	្ន	SGD / DISSECTION		
31-07-2024 Wednesday	Practical & Topics & Venue I	<b>CBL/SGD</b> Mentioned at the	Properties of synaptic transmission Physiology of Pain, dual Pathway for Transmission of pain, Analgesia system and thermal sensation		Br (	Embryology Development of Spinal Cord	General Anatomy Autonomic Nervous System	Triglyceride Metabolism Transport	Introduction to Lipoproteins, chylomicrons, VLDL Metabolism	Br(	Meninges, Dural venous sinuses and intracranial	SDL Biochemistry Chylomicron Metabolism		
	end		Dr. Fazania (Even) Prof Dr. Samia / Dr. Kamil (Odd)		Pr. Samia / Dr. Kamil (Odd)		Prof. Dr. Ifra Ass Saeed (Even)	soc. Prof .Dr. Arsalan Manzoor (Odd)	Dr. Aneela (Even)	Dr. Kashif (Odd)	-	hemorrhages		
			PHYSIOLOGY (LGIS)		ANATOM		IY (LGIS)	BIOCHE	MISTRY (LGIS)		SGD / DISSECTION	SDL Anotomy		
01-08-2024 Thursday	<b>Practical &amp;</b> Topics & Venue I en	<b>CBL/SGD</b> Mentioned at the d	Physiology of Pain, dual Pathway for Transmission of pain, Analgesia systen and thermal sensation	n Prope	Properties of synaptic transmission		General anatomy Autonomic Nervous system	Embryology Development of Spinal Cord	Introduction Lipoprotein chylomicrons, V Metabolism	to s, /LDL n Triglyceride Metabolism Transport		Spinal Cord	Posterior cranial fossa Dural venous sinuses and intracranial	
			Prof Dr. Samia / Dr. Kamil (Even)		Dr. Faizania (Odd)		Assoc. Prof. Dr. Arsa Manzoor (Even)	alan Prof. Dr. Ifra Saeed (Odd)	Dr. Kashi (Even)	f Dr. Aneela (Odd)			hemorrhages	
	8:00am-	900am	9	:00am-10:	00am		10:00am-11:00ar	m	11:00	am-12:00pm		·		
_	PEDIA	FRICS	РНҮ	SIOLOGY	Y (LGIS)		QURAN TRANSLAT	TION	QURAN	TRANSLATION				
02-08-2024 Friday	Menir	ngitis	Sensory Pathways for transmitting Somatic Signals Parasympathetic		Sensory Pathways for transmitting Somatic Signals     Introduction to AN, Basic       Characteristics of Sympathetic & Parasympathetic			Imaniyaat-5		Imaniyaat-6				
	Dr. Mamoona Qudrat(Even)	Dr. Tanzeela Rani(Odd)	Dr. Fahd (Even)		Dr Uzma (Odd)		Mufti Naeem Sherazi	(Odd)	Mufti Nae	em Sherazi (Even)				
			РНҮ	SIOLOGY	Y (LGIS)		РАТНО	DLOGY	PBL 1	(SESSION-II)		SGD / DISSECTION		
03-08-2024 Saturday	Practical & Topics & Venue 1 en	<b>CBL/SGD</b> Mentioned at the d	Introduction to ANS ,Basic Characteristics of Sympathetic & Parasympathetic	Sensory Pa	athways for transmitting Somatic Signals	Break	Introduction to ANS ,Basic Characteristic of Sympathetic & Parasympathetic System	s Meningitis	Р	BL Team	Break	Ascending Tracts and their clinicals	SDL Anatomy Anterior And middle Cranial Fossa	
					Dr. Fahd (Odd)		Dr. Nida Fatima (even)	Dr. Kiran Ahmad (odd)						

D 1 D				Т	able No. 1	(Time: 12:	:20pm – 0	2:00pm)		1 / 9 11	<u> </u>					
Batch D	1stribution	for Practical	Topics for Skill Lab with Venue		<b>XX</b> 1	D 1		Schedule fo	or Practica	al / Small	Group Discus	sion	. 1	1	D: 1	
Skills (a	II subjects)	Diamarian	Peripheral Nerve (Anatomy Histology	Day	Day Histology Pr		B	Biochemistry		Physiology Practical		Physiology SGD			Bioche	emistry SGD
CBL/S	mail Group	Discussion	Practical) Venue-Histology laboratory		D ( 1	<b>T</b> 1	D ( 1	Practical	Q	D ( 1	<b>75</b> 1	D ( 1		6	D ( 1	<b>75</b> 1
(Bioche	inisu'y and	Filyslology)	(Dr. Minanii Haq)		Batch	Teacher	Batch	Teacher	HC	Batch	Teacher	Batch	Teacher Name	HC	Batch	Teacher
Sr. No.	Datab	Doll No	• Color test for Sterols (Biochemistry	Monday	C	Name	D	Dr. Dahot	by	Б	Dr. Komil	^	Dr. Anaolo	- 2		Dr. Uzma
51. NO		01.70	(Physiclesy Prestical) Examination	Tuosday		- py	D C	Dr. Navah	ed		Dr. Anoolo	A P	Dr. Shazia	ed		Dr. Almas
1.	A P	71 140	• (Physiology Practical) Examination	Wodposday	E D	Dsed		Dr. Hayau	vis	A P	Dr. Shazia	D C	Dr. Navah	- vis		Dr. Annas
2.	D	/1-140	Physiology I ab	wednesday	Ľ	IVi HO	D	DI. UZIIIa	iper	Б	DI. SHazia	C	DI. Nayab	per	л	Romessa
3.	С	141-210		Thursday	В	H H	A	Dr. Almas	Su	D	Dr. Iora	Е	Dr. Igra	Su	C	Dr. Navab
4.	D	211-280		Saturday	А	Š	Е	Dr. Romessa		С	Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat
5.	Е	281-onwards	Topics for SGDs / CBL with Venue		1	able No. 2	Batch Di	stribution and Ve	enues for	Anatomy	Small Group	Discussio	on SGDs / Dissecti	ons		
L	1		Physiology SGD: Synapse & sensory	Batches	Ro	ll No	Ana	tomy Teacher		Ve	enue					
			Receptors (Venue: Lecture Hall No 5)	А	01	l-90	Dr. Ga	aiti Ara	New Le	cture Hal	ll Complex # 0	)1				
			Biochemistry SGD: Triglyceride	В	91	-180	Dr. M	inahil Haq	New Le	cture Hal	ll Complex # 0	)4	Supervised by Pr	of. I	Dr. Ayesh	a Yousaf
			Metabolism (Venue: Lecture Hall No	С	181	1-270	Dr. Ta	riq Furqan	Anatom	y Lecture	e Hall 04					
			2)	D	271 c	nwards	Dr. Sa	dia Baqir	Anatom	y Lecture	e Hall 03					
	T		Table No. 3 Batch D	istribution with	n Venues ai	nd Teacher	s Name fo	or Problem Based	Learning	g (PBL) S	essions	r				
Sr No.	Batches	Roll No	Venue	Teachers		Sr No. I	Batches	Roll No		Venu	e		Teac	chers	5	
1.	A1	(01-35)	Lecture Hall no.05 Physiology Dr. S	ana Latif (Dem	nonstrator	6.	C2	(176-210)	Lecture	Hall no.(	)4	Dr. Nay	yab Zonish (PGT P	hysi	ology)	
			Bioch	hemistry)					(Basem	ent)						
2.	A2	(36-70)	Lecture Hall #.04 (1 <sup>st</sup> Floor Dr. F	arah		7.	D1	(210-245)	Lecture	Hall no.(	)2	Dr. Iqra	a Ayub (PGT Phys	iolog	gy)	
			Anatomy) (Den	nonstrator of					(Basem	ent)						
2	D1	(71 105)	Physical American Measurer (Einst Elson Dr. B	1010gy)		0	D	(246, 280)	Carfor			Dr. Ma	h			
3.	BI	(/1-105)	Anatomy Museum (First Floor Dr. R	Konina Khalid	h anni atmr.)	8.	D2	(246-280)	(Decem	ence Rooi	n	Dr. Mu	hammad Usman			
4	D2	(106, 140)	Anatomy) (Den Lasture Hell no 02 (Einst Floor) Dr. S	Iolistrator Dioc	nemistry)	0	<b>E</b> 1	(201 215)	(Daseni	ent)	1 no 01		maha (DCT Dhusia	10.00	.)	
4.	D2	(100-140)	Lecture Hall 10.05 (First Floor) Dr. S	aula Daqli	or of	9.	EI	(281-515)	new Le	cture Ha	11 110.01	Dr. Ka	inisha (PGT Physio	nogy	)	
			(Selli Anat	omy)												
5	C1	(141-175)	Lecture Hall no 05 (Basement) Dr A	li Zain (PGT		10	E2	(315 onwards)	Lecture	Hall no (	)4	Dr Jaw	vad Hassan			
5.		(1111/3)	Physics and the physics of the physi	iology)				(ere onwards)				(Demoi	nstrator Physiology	7)		
L	1	1	Table No. 0	6 Venues for La	arge Group	Interactive	e Session	(LGIS)						/		
			Odd Roll Numbers	s New	/ Lecture H	all Comple	ex Lecture	Theater # 01	1							
			Even Roll Number	· New	Lecture H	all Comple	ex Lecture	Theater # 04	1							
									-							

			Se	econd Y	ear Tim (05	netable : 5-08-20	for CNS   24 To 10-	Module (Second Wee -08-2024)	ek)				
Date/Day	8:00am-9:20am	9:20am –	10:10am	10:10am – 10:30am	1	10:30am-11:2	20am	11:20am-12	2:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments	
		PHYSIOLO	GY (LGIS)		BIO	CHEMISTR	RY (LGIS)	PATHOL	LOGY		SGD / DISSECTION		
05-08-2024 Monday	Practical & CBL/SGD Topics & Venue Mentioned at the end	Somatosensory cortex and lesions of somatosensory cortex	Excitatory and inhibitory effects of sympathetic and parasympathetic stimulation		LDL, HDL I metabolism (		Fatty Acid Oxidation I	Patterns of injury in	nervous system		Descending Tracts and their clinicals	SDL Physiology Sensory pathways for transmitting somatic signals-II	
		Dr. Fahd (Even)	Dr. Uzma (Odd)		Dr. Kashif	(Even) D	Dr. Aneela (Odd)	Dr. Nida Fatima (Even)	Dr Kiran Ahmad (Odd)				
		PHYSIOLO	GY (LGIS)		Α	NATOMY (	(LGIS)	BIOCHEMIST	TRY (LGIS)		SGD / DISSECTION		
06-08-2024 Tuesday	Practical & CBL/SGD Topics & Venue Mentioned at the end	Excitatory and inhibitory effects of sympathetic and parasympathetic stimulation	omatosensory cortex and esions of somatosensory cortex		Histolog Of spinal co peripheral 1	gy ord and I nerve Rl	Embryology Development of hombencephalon	Fatty acid oxidation I	LDL, HDL metabolism		Lesions of Spinal Cord	SDL Physiology Physiology of pain Dual pathway for transmission of pain	
		Dr. Uzma (Even)	Dr. Fahd (Odd)	¥	Asst. Prof. I Tasleem	Dr. Maria (Even)	Prof. Dr. Ifra Saeed (Odd)	Dr. Aneela (Even)	Dr. Kashif (Odd)	ĸ			
		PHYSIOLO	GY (LGIS)	e a	A	NATOMY (	(LGIS)	SURGE	CRY	e a	SGD / DISSECTION		
07-08-2024 Wednesday	Practical & CBL/SGD Topics & Venue Mentioned at the end	Concept of Association areas, Concept of Dominant and non- dominant cerebral hemispheres	CSF, Blood Brain Barrier Blood CSF Barrier, Lumbar puncher	Вг	Embryold Developme Rhombencep	Embryology Histology Development of Of spinal cord and peripheral nerve Spinal injury and Head injury		Spinal injury and Head injury		injury and Head injury		Medulla Oblongata	SDL Biochemistry HDL & LDL Metabolism
		Dr. Shazia (Even)	Dr. Maryam (Odd)		Prof. Dr. Ifra (Even)	a Saeed Ass	st. Prof. Dr. Maria Tasleem (Odd)	Dr. Soban Sarwar Gondal(Even)	Dr. Usman Malik (Odd)				
		PHYSIOLO	GY (LGIS)			RADIOLO	GY	BIOCHEMIST	RY (LGIS)		SGD / DISSECTION		
08-08-2024 Thursday	Practical & CBL/SGD Topics & Venue Mentioned at the end	CSF, Blood Brain Barrier Blood CSF Barrier, Lumbar puncher	Concept of Association areas, Concept of Dominant and non- dominant cerebral hemispheres		Skull Radio		graph Dr Saba	Hyperlipidemia And Fatty Liver	Fatty acid oxidation II		Pons & the Fourth Ventricle	SDL Anatomy Meninges, Spinal ,cord	
		Dr .Maryam	Dr. Shazia		(Even	n)	(Odd)	Dr. Kashif (Even)	Dr. Aneela (Odd)				
	8:00am-900am	9:00am-1	0:00am		Í	10:00am-11:0	00am	11:00am-12	2:00pm				
	MEDICINE	PHYSIOLO	GY (LGIS)				PAKSTU	DIES/ISLAMMIYAT	•				
09-08-2024 Friday	Spinal cord and peripheral nervous system	Speech and aphasia	Limbic system, Functionsof hypothalamus	Musa	awat	1973 ka .	Aaeen	1973 ka Aaeen	Musawat				
	Dr Javeria Dr Riffat Malik(Even) (Odd)	Dr. Shazia (Even)	Dr. Maryam (Odd)	Mufti Naeı (Eve	m Sherazi en)	Qari Ama (Odo	n Ullah d)	Qari Aman Ullah (Even)	Mufti Naem Sherazi (Odd)				
		PHYSIOLO	GY (LGIS)		A	NATOMY (	(LGIS)	OBS & G	YNAE		SGD / DISSECTION		
10-08-2024 Saturday	Practical & CBL/SGD Topics & Venue Mentioned at	Limbic system, Functionsof hypothalamus	Speech and aphasia	e a k	Histology cerebellu	y of I um M	Embryology Development of Iesencephalon &	Seizures during pregnanc	y(eclampsia/epilepsy)	e a k	Midbrain	SDL Anatomy Ascending tracts &	
,	the end	Dr. Maryam (Even)	Dr. Shazia (Odd)	Bı	Asst. Prof. Maria (Ev	E. Dr. Proven)	rosencephaion of. Dr. Ifra Saeed (Odd)	Dr Ismat Batool (Even)	Dr Sadia Waheed (Odd)	Bı		Descending tracts	
											116	5   Page	

				T	able No. 1	(Time: 12	:20pm – 02	2:00pm)								
Batch Dist	tribution f	for Practical	Topics for Skill Lab with Venue					Schedule fo	or Practica	ıl / Small	Group Discus	sion		-	1	
Skills (all s CBL / Sm	subjects) all Group	Discussion	(Anatomy Histology Practical) Ganglia Venue-Histology laboratory (Dr. Sadia	Day	Day Histolog		Bi	Biochemistry Practical		Physiology Practical		Physiology SGD			Bioche	mistry SGD
(Biochemi	istry and I	Physiology)	Baqir)		Batch	Teacher	Batch	Teacher	HOL	Batch	Teacher	Batch	Teacher Name	HOL	Batch	Teacher
C. N.	D . ( . 1.	D.11 M.	• (Biochemistry Practical) Detection of	Manila	0	Name	р	Name D. D. L.	by	Б	Name D. K. 1		D. A	20		Name
Sr. No	Batch	Roll No.	Cholesterol Crystals	Monday	<u> </u>	by	B	Dr. Rahat	l þá	E	Dr. Kamil	A	Dr. Aneela	- Ipa		Dr. Uzma
1.	A	01-70	• (Physiology Practical) Examination of	Tuesday	D	eq	C	Dr. Nayab	vise	A	Dr. Aneela	B	Dr. Shazia	/ise	E	Dr. Almas
2.	В	71-140	Motor System Venue – Physiology Lab	Wednesday	E	ervis HOD	D	Dr. Uzma	uperv	В	Dr. Shazia	С	Dr. Nayab	uperv	A	Dr. Romessa
3.	С	141-210		Thursday	В	dn	Α	Dr. Almas	S	D	Dr. Iqra	Е	Dr. Iqra	S	С	Dr. Nayab
4.	D	211-280		Saturday	А	S	Е	Dr. Romessa		С	Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat
5.	Е	281-onwards	Topics for SGDs / CBL with Venue		Т	able No. 2	Batch Dis	tribution and Ve	enues for A	Anatomy	Small Group	Disscussi	ionSGDs / Dissection	ons		
			Physiology SGD: Autonomic Nervous	Batches	Ro	ll No	Anat	omy Teacher		Ve	nue					
			System (Venue: Lecture Hall No 5)	А	01	1-90	Dr. Ga	iti Āra	New Le	cture Ha	1 Complex # 0	1				
			Biochemistry SGD: Fatty Acid	В	91	-180	Dr. Mi	nahil Haq	New Le	cture Ha	1 Complex # (	4	Supervised by Pr	of. I	Dr. Ayesh	a Yousaf
			Oxidation (Venue: Lecture Hall No 2)	C	18	1-270	Dr. Ta	ia Furgan	Anatom	v Lecture	e Hall 04	-	1 5		5	
				D	271 c	nwards	Dr Sa	lia Bagir	Anatom	v Lecture	Hall 03					
					2710	ii wai ab	DI. Du	nu Buqn	7 matori	ly Deetai	5 Hull 05					
			Table No. 3 Batch I	Distribution with	Venues a	nd Teacher	s Name for	r Problem Based	Learning	g (PBL) S	essions					
Sr No.	Batches	Roll No	Venue	Teachers		Sr No.	Batches	Roll No		Venu	e		Teac	chers		
1.	A1	(01-35)	Lecture Hall no.05 Physiology Dr.	Sana Latif (Dem	onstrator	6.	C2	(176-210)	Lecture	Hall no.0	)4	Dr. Nay	yab Zonish (PGT P	hysio	ology)	
			Biod	chemistry)					(Basem	ent)		5		2	237	
2.	A2	(36-70)	Lecture Hall #.04 (1 <sup>st</sup> Floor Dr.	Farah		7.	D1	(210-245)	Lecture	Hall no.(	)2	Dr. Iqra	a Ayub (PGT Physi	iolog	y)	
			Anatomy) (De	monstrator of					(Basem	ent)		1	<i>, , , ,</i>	U		
			Phy	siology)						,						
3.	B1	(71-105)	Anatomy Museum (First Floor Dr.	Rohina Khalid		8.	D2	(246-280)	Confere	ence Rooi	n	Dr. Mu	hammad Usman			
		· · · /	Anatomy) (De	monstrator Bioc	hemistry)				(Basem	ent)		(PGT P	Physiology)			
4.	B2	(106-140)	Lecture Hall no.03 (First Floor) Dr.	Sadia Baqir		9.	E1	(281-315)	New Le	cture Hal	1 no.01	Dr. Ra	msha (PGT Physio	logy	)	
			(Ser	nior Demonstrate	or of			( /						- 05	/	
			Ana	tomy)												
5.	C1	(141-175)	Lecture Hall no.05 (Basement) Dr.	Ali Zain (PGT		10	E2	(315 onwards)	Lecture	Hall no.(	)4	Dr. Jaw	vad Hassan			
	-		Phy	siology)				(,				(Demor	nstrator Physiology	<i>v</i> )		
					No I	PBL during	this week							/		
1			Table No.	6 Venues for La	arge Group	Interactiv	e Session (	LGIS)								
				rs New	Lecture H	all Compl	ex Lecture	Theater # 01								
			Odd Roll Number				*									
\			Odd Roll Number Even Roll Number	r New	Lecture H	[all Compl	ex Lecture	Theater # 04								
\			Odd Roll Number Even Roll Number	er New	Lecture H	all Compl	ex Lecture	Theater # 04								
\			Odd Roll Number Even Roll Number	er New	<u>Lecture H</u>	all Compl	ex Lecture	Theater # 04								
\			Odd Roll Number Even Roll Number	er New	<u>Lecture H</u>	all Compl	ex Lecture	Theater # 04								
\			Odd Roll Number Even Roll Number	er New	<u><sup>r</sup> Lecture H</u>	all Compl	ex Lecture	Theater # 04	J							
\			Odd Roll Number Even Roll Number	er New	<u>r Lecture H</u>	all Compl	ex Lecture	Theater # 04								

					(12-)	00-2024 10 17-0	0-2024)					
Date/Day	8:00am-	9:20am	9:2	0am – 10:10am	10:10am – 10:30am	10:30an	n-11:20am	11:20am	12:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments
			PHYS	SIOLOGY (LGIS)		ANATO	MY (LGIS)	PHYSIOLOG	Y SDL NO. 1		CBL/SGD/ DISSECTION	SDL
12-08-2024 Monday	Practical & Topics & Venue Ma	CBL/SGD entioned at the end	Learning & Memory	Reticular Activating System & Sleep		Embryology Development of Mesencep Prosencephalon	halon & Histology of cerebellum	of Somatosensor lesi	Somatosensory system & its lesions		CBL (Cystic Astrocytoma of Cerebellum)	Physiology CSF, BBB,
·	- -		Dr. Maryam (Even)	Dr. Fahd (Odd)	Dr. Fahd (Odd)		Asst. Prof. Dr. Maria Tasleem (Odd)	Dr. Ramsha (Odd)	Dr. Ali Zain (Even)	a k	Cerebellum	Blood CSF Barrier, LP
			PHYS	SIOLOGY (LGIS)	r e	BIOCHEM	ISTRY (LGIS)	PHYSIOLOG	Y SDL NO. 2	re r	SGD / DISSECTION	SDL
13-08-2024	Practical &	CBL/SGD	Reticular Activa System & Sle	ting Learning & Memory	B	Hyperlipidemia & Fatty Liver	Fatty acid Oxidation-II	CSF, BBB, Blo Lumbar	od CSF Barrier, puncher	B	Thalamus, Epithalamus,	Physiology Muscle
Tuesday	Topics & venue int	intoned at the end	Dr. Fahd (Even)	Dr. Maryam (Odd)		Dr. Kashif (Even)	Dr. Aneela (Odd)	Dr. Maryam (Even)	Dr. Iqra (Odd)		Subthalamus	Golgi tendon organ
14-08-2024 Wednesday						Independe	nce Day					
ý			PHYS	SIOLOGY (LGIS)		BIOCHEM	ISTRY (LGIS)	PHYSIOLOG	Y SDL NO. 3		SGD / DISSECTION	
15-08-2024 Thursday	<b>Practical &amp;</b> Topics & Venue Me	CBL/SGD entioned at the end	EEG & Epilepsy	Introduction to Moto Nervous System & reflex action, Conditional Reflexes & Its Properties, Control of Spinal cord Reflexes by Higher Centers	Break	Fatty acid synthesis	Cholesterol synthesis an regulation, hypercholesterolemia	d Introduction	on to ANS	Break	Hypothalamus	SDL Biochemistry Fatty acid oxidation
			Dr. Maryam (Even)	Dr Sidra (Odd)		Dr Aneela (Even)	Dr. Kashif (Odd)	Dr. Farah (Even)	Dr. Najam us Sehar (Odd)			
	8:00 AM -	9:00 AM	9:00	AM - 10:00 AM		10:00–11:00AM 11:00–12:00AM			2:00AM			
	BIOCHEMIS	TRY (LGIS)	PHYS	SIOLOGY (LGIS)		PAH	KSTUDIES/ISLAMMIYA	T	1			
16-08-2024 Friday	Metabolism of Glycerophospholipids and siphonophore lipid	Ketone body metabolism	EEG & Epilepsy	System & reflex action, Conditional Reflexes & Its Properties, Control of Spinal cord Reflexes by Higher Centers	KI	nwateen k hakook	Qayam e Pakistan, Ibtidai Mushkilaat / Islmi Jamuraia	Qayam e Pakistan, Ibtidai Mushkilaat / Islmi Jamuraiat	e Pakistan, Khwateen k Iushkilaat / hakook Iamuraiat		SDL Anatomy longata & Pons & Cerebellum	
	Dr. Kashif	Dr. Aneela	Dr Sidra	Dr. Maryam	Mufti	Naem Sherazi (Even)	Oari Aman Ullah (Odd)	Qari Aman	Mufti Naem			
	(Even)	(Odd)	(Even)	(Odd)		DIOCHEN		Ullah(Even)	Sherazi (Odd)			
			PHYS	Introduction to Moto Nervous		BIOCHEMI	STRY (LGIS)	MEDICIN	E (LGIS)	-	SGD / DISSECTION	SDI
17-08-2024 Saturday	Practical & Topics & Venue Me	CBL/SGD entioned at the end	EEG & Epilepsy	System & reflex action, Conditional Reflexes & Its Properties, Control of Spinal cord Reflexes by Higher Centers	ir e a k	Cholesterol synthesis and regulation, hypercholesterolemia	Fatty acid synthesis	Cerebellar	disorders	reak	Cortical areas, Layers and Lesions of Cerebrum	Anatomy Diencephalor *Online Clinical
			Dr Sidra (Even)	Dr. Maryam (Odd)	B	Dr. Kashif (Even)	Dr. Aneela (Odd)	Dr Javeria Malik (Even)	r Faran Maqbool (Odd)			Evaluation

				Т	able No 1	(Time: 12	·20pm – 0	2.00pm)								
Batch D	istribution f	for Practical	Topics for Skill Lab with Venue	<u>·</u>	ubie 110. 1	(11110:12	.20pm 0	Schedule fo	r Practical / Si	nall Gi	roun Discus	sion				
Skills (a CBL / S	ll subjects) nall Group	Discussion	(Anatomy Histology Practical) Spi Cord Venue-Histology laboratory (	nal Day	Histolog	y Practical	B	iochemistry Practical	Phy	vsiolog	y Practical	Phy	ysiology SGD		Bioche	emistry SGD
(Biocher	nistry and l	Physiology)	Gaiti Ara) • (Biochemistry Practical) Estimatio	n of	Batch	Teacher Name	Batch	Teacher Name	IOH Ba	tch	Teacher Name	Batch	Teacher Name	HOL	Batch	Teacher Name
Sr. No	Batch	Roll No.	serum TAGS	Monday	С	>	В	Dr. Rahat		E E	Dr. Kamil	А	Dr. Aneela	þ	D	Dr. Uzma
1.	A	01-70	(Physiology Practical) Examination	n of Tuesday	D	- d l	C	Dr. Navab	sed		Dr. Aneela	B	Dr. Shazia	sed	E	Dr. Almas
2.	В	71-140	Cerebellar System Venue – Physio Lab Lab	logy Wednesday	Е	ervise HOD	D	Dr. Uzma	Ipervi	3 I	Dr. Shazia	C	Dr. Nayab	ipervi	А	Dr. Romessa
3.	С	141-210		Thursday	В	I	А	Dr. Almas	N N	) [	Dr. Iara	Е	Dr. Igra	Sc	С	Dr. Navab
4.	D	211-280		Saturday	Ā	Š	E	Dr. Romessa			Dr. Navab	D	Dr. Kamil		B	Dr. Rahat
5.	E	281-onwards	Topics for SGDs / CBL with Ven	ue	ſ	Table No. 2	Batch Di	stribution and Ve	enues for Anat	omv Sr	mall Group	Disscussi	ionSGDs / Dissecti	ons		
	_		Anatomy CBL: Cystic Astrocytor	na of <b>Batches</b>	Ro	oll No	Ana	tomy Teacher		Venu	ie					
			Cerebellum	A	0	1-90	Dr. Ga	aiti Ára	New Lecture	Hall C	Complex # (	)1				
			• Physiology SGDs: Motor nervous	В	91	-180	Dr. M	inahil Haq	New Lecture	Hall C	Complex # (	)4	Supervised by Pr	of. I	Dr. Ayesh	na Yousaf
			system, muscle spindle and Golgi	С	18	1-270	Dr. Ta	riq Furqan	Anatomy Le	cture H	Hall 04				·	
			tendon organ (Venue: Lecture Hall	No D	271 c	onwards	Dr. Sa	dia Baqir	Anatomy Le	cture H	Hall 03					
			5)													
			Biochemistry CBL: Respiratory     Distress syndrome (Venue: Lecture     Hall No 2)	2												
			Table No. 3 B	atch Distribution with	Venues a	nd Teacher	s Name fo	or Problem Based	Learning (PB	L) Sess	sions	Γ		_		
Sr No.	Batches	Roll No	Venue	Teachers		Sr No. 1	Batches	Roll No	V	/enue			Teac	chers		
1.	A1	(01-35)	Lecture Hall no.05 Physiology	Dr. Sana Latif (Den Biochemistry)	onstrator	6.	C2	(176-210)	Lecture Hall (Basement)	no.04		Dr. Nay	yab Zonish (PGT P	hysio	ology)	
2.	A2	(36-70)	Lecture Hall #.04 (1st Floor Anatomy)	Dr. Farah (Demonstrator of Physiology)		7.	D1	(210-245)	Lecture Hall (Basement)	no.02		Dr. Iqra	a Ayub (PGT Physi	iolog	y)	
3.	B1	(71-105)	Anatomy Museum (First Floor Anatomy)	Dr. Rohina Khalid (Demonstrator Bioc	hemistry)	8.	D2	(246-280)	Conference (Basement)	Room		Dr. Mu (PGT P	hammad Usman Physiology)			
4.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Sadia Baqir (Senior Demonstrate Anatomy)	or of	9.	E1	(281-315)	New Lecture	e Hall n	10.01	Dr. Ra	msha (PGT Physio	logy	)	
5.	C1	(141-175)	Lecture Hall no.05 (Basement)	Dr. Ali Zain (PGT Physiology)		10	E2	(315 onwards)	Lecture Hall	no.04		Dr. Jaw (Demor	vad Hassan nstrator Physiology	r)		
					No l	PBL during	g this weel	ĸ					<u> </u>	/		
			Tabl	e No. 6 Ve <u>nues for L</u> a	arge <u>Group</u>	Interactiv	e Session	(LGIS)								
			Odd Roll Nu	mbers New	Lecture H	Iall Comple	ex Lecture	e Theater # 01								
			Even Roll N	umber New	Lecture H	Iall Comple	ex Lecture	e Theater # 04	1							
									-							

			Second Y	Year Tir	netable for CNS	S Module (Fou	rth Week)				
Date/Day	8:00am-9:20am	9:20am –	10:10am	( 1 10:10am – 10:30am	.9-00-2024 102 10:30am-	- <b>11:2</b> 0am	11:20an	n-12:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home
		PHYSIOLO	GY (LGIS)		SURG	GERY	MEI	DICINE		SGD / DISSECTION	
19-08-2024	Practical & CBL/SGD Topics & Venue Mentioned at	Introduction to Cerebellum, Neuronal Circuits of Cerebellum & Its Motor functions	Muscle Spindle & Golgi Tendon organ, role of muscle spindle & Golgi tendon organ		Management of	hydrocephalus	Epilepsy and other	convulsive disorders		Discotion	SDL Physiolo
Wonday	the end	Dr. Esizaria	in voluntary motor activity		Dr. Fraz Mehmood	Dr. Ammad ul Haq (Odd)	Dr Javeria Malik (Even)	Dr Faran Maqbool (Odd)		Dissection	Trypoulaiainu
		(Even)	(Odd)			(000)	(Even)	(Odd)			
		PHYSIOLO	OGY LGIS		ANATOM	IY (LGIS)	PBL 2 (8	SESSION-I)		SGD / DISSECTION	
20-08-2024 Tuesday	<b>Practical &amp; CBL/SGD</b> Topics & Venue Mentioned at the end	Muscle Spindle & Golgi Tendon organ, role of muscle spindle & Golgi tendon organ in voluntary motor activity	Introduction to Cerebellum, Neuronal Circuits of Cerebellum & Its Motor functions	a k	Histology of Cerebrum	Embryology Development of Peripheral and Autonomic Nervous System	PBI	- Team	a k	Lateral ventricle, Ventricular system, CSF and Blood Brain Barrier	SDL Physiolog Properties of reflex action, Control of spir cord reflexes b
		Dr. Sidra	Dr. Fazania	r e	Asst. Prof. Dr Maria	Prof. Dr. Ifra Saeed			r e	Damei	higher centers
		(Even)	(Odd)	B	Tasleem (Even)	(Odd)			8		
21-08-2024 Wednesday	Practical & CBL/SGD Topics & Venue Mentioned at the end	EEG & F	Spilepsy		Embryology Development of Peripheral and Autonomic Nervous System	Histology of Cerebrum	Encephalitis			Cranial nerves- I,II,II,IV,VI	SDL Biochemi Synthesis &Interconvers of Ketone Bod (diagrammatica Regulation c
		Dr Maryam (Even)	Dr. Iqra (Odd)		Prof. Dr. Ifra Saeed (Even)	Asst. Prof. Dr. Maria Tasleem (Odd)	Dr Javeria Malil (Even)	k Dr Faran Maqbool(Odd)			Ketogenesis Ketolases
		PHYSIOLOG	Y SDL NO 5		BIOCHEMI	ISTRY SDL	PBL 2 (S	ESSION-II)		SGD / DISSECTION	
	Practical & CBL/SGD	Reticular Activatin	g System & Sleep		Glycerophospholipi	ds & Sphingolipids					SDI Diashami
22-08-2024 Thursday	Topics & Venue Mentioned at the end	Dr Farah (Even)	Dr. Ali Zain (Odd)		Dr. Uzma Zafar (Odd)	Dr. Rahat (Even)	PBI	- Team		Cranial nerves - V, VII	SDL Biochenin
	8:00 AM - 9:00 AM	9:00 AM -	10:00 AM		10:00-11:00AN	1	11:00AM	I-12:00PM		I	
	Practical & CBL/SGD	PHYSIOLOG	Y SDL NO 6			SGD / DISSECTION	1			SDL Anatomy	
23-08-2024 Friday	Topics & Venue Mentioned at the end. (Wednesday Batch 14-08-	Motor Cortex & Physic Neocortex, Cortico Spir Extra Pyrami	ological Importance of nal or pyramidal Tract idal System			Cranial Nerves VIII-X	II		Lateral ven CSF an	tricle, Ventricular system, d Blood Brain Barrier	
24-08-2024 Saturday	2024) Practical & CBL/SGD Topics & Venue Mentioned at the end	Dr Maryam (Even)	Dr Iqra (Odd)	Early Clinical Exposure (ECE)						SDL Anator Cranial Nerve	

				Т	able No. 1 (Time:	12:20pm - 02	2:00pm)							
Batch D	istribution	for Practical	Topics for Skill Lab with Venue				Schedule for	or Practical / Sn	all Group Discus	sion			_	
Skills (a	ll subjects)		(Anatomy Histology Practical)	Day	Histology Practi	cal Bi	ochemistry	Phys	iology Practical	Ph	ysiology SGD		Bioche	mistry SGD
CBL / S	mall Group	Discussion	Cerebellum Venue-Histology			]	Practical				-			
(Bioche	mistry and	Physiology)	laboratory (Dr. Minahil Haq)		Batch Teacl	her Batch	Teacher	🖸 🛛 Bate	h Teacher	Batch	Teacher Name	ΙŌ	Batch	Teacher
		<u>.</u>	(Biochemistry Practical) Estimation	on	Nan	ne	Name	y F	Name			۲ ۲		Name
Sr. No	Batch	Roll No.	of Serum HDL	Monday	<u>C</u>	В	Dr. Rahat	d p E	Dr. Kamil	Α	Dr. Aneela	d b	D	Dr. Uzma
1.	Α	01-70	(Physiology Practical)	Tuesday	D	С	Dr. Nayab	A S.	Dr. Aneela	В	Dr. Shazia	ise	E	Dr. Almas
2.	В	71-140	Ophthalmoscopy Venue –	Wednesday	E jise		Dr. Uzma	P B	Dr. Shazia	С	Dr. Nayab	erv	Α	Dr.
			Physiology Lab		erv	)H		dn				dn	-	Romessa
3.	С	141-210		Thursday	B dn	A	Dr. Almas	N D	Dr. Iqra	E	Dr. Iqra	S	С	Dr. Nayab
4.	D	211-280		Saturday	A	E	Dr. Romessa	C	Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat
5.	E	281-onwards	Topics for SGDs / CBL with Venue	e	Table No	. 2 Batch Dis	tribution and Ve	enues for Anato	my Small Group	Disscuss	ionSGDs / Dissecti	ons		
			• Physiology SGD: Motor Nervous	Batches	Roll No	Anat	omy Teacher		Venue					
			System (Venue: Lecture Hall No 5)	А	01-90	Dr. Ga	iti Ara	New Lecture	Hall Complex # (	01				
			• Biochemistry CBL: Ischemic Heart	В	91-180	Dr. Mi	nahil Haq	New Lecture	Hall Complex # (	04	Supervised by Pr	of. I	Dr. Ayesh	a Yousaf
			disease (Venue :Lecture Hall No 2)	С	181-270	Dr. Ta	riq Furqan	Anatomy Lec	ture Hall 04					
				D	271 onwards	Dr. Sac	lia Baqir	Anatomy Lec	ture Hall 03					
			Table No. 3 Bat	tch Distribution with	Venues and Teacl	hers Name for	r Problem Based	l Learning (PBI	a) Sessions					
Sr No.	Batches	Roll No	Venue	Teachers	Sr No.	Batches	Roll No	V	enue		Teac	chers		
1.	A1	(01-35)	Lecture Hall no.05 Physiology	Dr. Sana Latif (Dem	nonstrator 6.	C2	(176-210)	Lecture Hall	no.04	Dr. Na	yab Zonish (PGT P	hysio	ology)	
				Biochemistry)				(Basement)						
2.	A2	(36-70)	Lecture Hall #.04 (1st Floor	Dr. Farah	7.	D1	(210-245)	Lecture Hall	10.02	Dr. Iqr	a Ayub (PGT Physi	iolog	y)	
			Anatomy)	(Demonstrator of				(Basement)						
				Physiology)										
3.	B1	(71-105)	Anatomy Museum (First Floor	Dr. Rohina Khalid	8.	D2	(246-280)	Conference R	oom	Dr. Mu	ıhammad Usman			
			Anatomy)	(Demonstrator Bioc	hemistry)			(Basement)		(PGT F	Physiology)			
4					0	E1	(281-315)	New Lecture	Hall no.01	Dr. Ra	umsha (PGT Physio	logy	)	
4.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Sadia Baqir	5.		· · · · · · · · · · · · · · · · · · ·				•			
4.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Sadia Baqir (Senior Demonstrate	or of		~ /							
4.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Sadia Baqir (Senior Demonstrate Anatomy)	or of		~ /							
4. 5.	B2 C1	(106-140)	Lecture Hall no.03 (First Floor) Lecture Hall no.05 (Basement)	Dr. Sadia Baqir (Senior Demonstrate Anatomy) Dr. Ali Zain (PGT	or of 10	E2	(315 onwards)	Lecture Hall	10.04	Dr. Jav	vad Hassan			
4. 5.	B2 C1	(106-140)	Lecture Hall no.03 (First Floor) Lecture Hall no.05 (Basement)	Dr. Sadia Baqir (Senior Demonstrato Anatomy) Dr. Ali Zain (PGT Physiology)	or of 2.	E2	(315 onwards)	Lecture Hall	no.04	Dr. Jav (Demo	vad Hassan nstrator Physiology	/)		
4. 5.	B2 C1	(106-140)	Lecture Hall no.03 (First Floor) Lecture Hall no.05 (Basement) Table	Dr. Sadia Baqir (Senior Demonstrato Anatomy) Dr. Ali Zain (PGT Physiology) No. 6 Venues for La	or of 10 arge Group Interac	E2 tive Session (	(315 onwards)	Lecture Hall	no.04	Dr. Jav (Demo	vad Hassan nstrator Physiology	7)		
4. 5.	B2 C1	(106-140)	Lecture Hall no.03 (First Floor) Lecture Hall no.05 (Basement) Table Odd Roll Num	Dr. Sadia Baqir (Senior Demonstrate Anatomy) Dr. Ali Zain (PGT Physiology) No. 6 Venues for La nbers New	or of 10 arge Group Interac Lecture Hall Com	E2 tive Session (	(315 onwards) LGIS) Theater # 01	Lecture Hall	no.04	Dr. Jav (Demo	vad Hassan nstrator Physiology	7)		
4.	B2 C1	(106-140)	Lecture Hall no.03 (First Floor) Lecture Hall no.05 (Basement) Table Odd Roll Nun Even Roll Nun	Dr. Sadia Baqir (Senior Demonstrate Anatomy) Dr. Ali Zain (PGT Physiology) No. 6 Venues for La nbers New mber New	pr of 7. 10 arge Group Interac 7 Lecture Hall Com 7 Lecture Hall Com	E2 tive Session ( plex Lecture plex Lecture	(315 onwards) LGIS) Theater # 01 Theater # 04	Lecture Hall	no.04	Dr. Jav (Demo	vad Hassan nstrator Physiology	7)		

# Second Year Timetable for CNS Module (Fifth Week)

## (26-08-2024 To 31-08-2024)

Date/Day	8:00am-9:20am	9:20am – 10:10am		10:10am – 10:30am	10:3	30am-11	:20am	11:20am-12	:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments
		PHYSIO	LOGY (LGIS)		Γ	MEDICI	INE	FAMILY ME	DICINE		SGD / DISSECTION	
26-08-2024 Monday	<b>Practical &amp; CBL/SGD</b> Topics & Venue Mentioned at the end	Manifestations of Cerebellar Disease Dr Fazania (Even)	Poly synaptic reflexes & transaction of spinal cord, role of brain stem in controlling motor function & lesions of motor system Dr. Sidra (Odd)		Dr Javeria Mal	Stroke ik	Dr Faran Maqbool	Approach to a patien disease Dr. Sad	t with neuronal e ia	-	Basal Ganglia	SDL Physiology Introduction to cerebellum Neuronal circuits of cerebellum
	ļ	DUVSIO			(Even)	NOCV	(Odd)	DEHAVIODAI	SCIENCES		SCD / DISSECTION	
27-08-2024 Tuesday	<b>Practical &amp; CBL/SGD</b> Topics & Venue Mentioned at the end	Poly synaptic reflexes & transaction of spinal cord, role of brain stem in controlling motor function & lesions	Manifestations of Cerebellar Disease		Limbic System &	& functio	on of Hypothalamus	Memory & E	motions		Limbic system and Reticular Formation	SDL Physiology Basal Ganglia & Lesions
		Dr. Sidra (Even)	Dr Fazania (Odd)	a k	Dr. Maryam (C	Odd)	Dr. Iqra (Even)	Dr. M. Azeem Rao (Even)	Dr. Zarnain Umar (Odd)	a k		
		PHYSIO	LOGY (LGIS)	re	R	ADIOLO	OGY	SURGE	RY	r e	CBL/SGD/ DISSECTION	SDL
28-08-2024 Wednesday	Practical & CBL/SGD Topics & Venue Mentioned at the end	Basal Ganglia & Lesions	Basal Ganglia & Motor Cortex & Physiological importance of Neocortex, Cortico Spinal or Pyramidal tracked, Extra pyramidal Systems		CT (Brain	scan and and Spin	l MRI nal Cord)	Poly trauma	patient	В	CBL(Middle Cerebral Artery Stroke) Blood supply of Brain and	Biochemistry Synthesis of Cholesterol and
		Dr. Uzma (Even)	Dr Maryam (Odd)		Dr Anum Zaho (even)	oor	Dr Faisal (odd)	Dr. Fraz Mehmood (Even)	Dr. Ali Tasaddaq(Odd)		Clinicals	its regulation
		PHYSIO	LOGY (LGIS)		ANA	TOMY	(LGIS)	BEHAVIORAL	SCIENCES		SGD / DISSECTION	SDI Anotomy
29-08-2024 Thursday	Practical & CBL/SGD Topics & Venue Mentioned at the end	Motor Cortex & Physiologi importance of Neocortex Cortico Spinal or Pyramid tracked, Extra pyramidal Systems	cal Basal Ganglia & al Lesions		Development of Cranium		Development of Cranium	Metacogn	ition		Radiological Imaging of CNS	Cranial nerves 8- 12, Basal Ganglia, Limbic system and
		Dr Maryam (Even)	Dr. Uzma (Odd)		Prof. Dr. Ifra Sa (Odd)	eed	Prof. Dr. Saima (Even)	Dr. Zarnain Umar(even)	Dr. Sadia Yasir(odd)			Formation
	8:00 AM - 9:00 AM	9:00 AN	/I – 10:00 AM		10:00 - 11	:00AM		11:00AM - 1	2:00PM			
	QURAN TRANSLATION IV	QURAN TI	RANSLATION V		BIOCHEMIST	'RY (LG	SIS)	PHYSIOLOGY	SDL NO.8		SDL Anatomy	
30-08-2024 Friday	Momalat-I	M	omalat-II	Meta Glyceroph sphingo	ıbolism of ospholipids and phospho lipid	Ketone	Body Metabolism	Learning & N	Memory			
	Mufti Naeem Sherazi (Odd)	Mufti Naee	m Sherazi (Even)	Dr. Ka	shif (Even)	Dı	r. Aneela (Odd)	Dr Nayab (Even)	Dr. Iqra (Odd)			
	Prostical & CRI /SCD	PHYSIOLO	OGY SDL NO. 09		PHYSIC Sensory Dath	OLOGY	SDL NO. 10	ISLAMI	ҮАТ	-	SGD/ DISSECTION	SDL Biochemistry
31-08-2024	Topics & Venue Mentioned at the end	Gasal Gang	glia & its Lesions	a k	Sensory Pathy	Signa	ils	Haj tul Wida	a Khutba	a k	Dissection	Online Clinical
Saturday		Dr. Maryam (Odd) Dr. Iqra (Even)		Bre	Dr. Jawad (E	Signals wad (Even) Dr. Usman (Odd)		(Odd) Mufti Naeem Shirazi		Bre	Discellon	Evaluation

				<u>_</u>	able <u>No. 1</u>	(Time: 12:	:20pm – <u>0</u>	2:00pm)									
Batch D	istribution f	for Practical	Topics for Skill Lab with Venue		uoio 110. 1	(111110-12	.20pm 0	Schedule fo	r Practical / S	mall Group Discu	ssion						
Skills (al CBL / Si	ll subjects) mall Group	Discussion	(Anatomy Histology Practical) Cerebrum, Venue-Histology	Day	Histolog	y Practical	Bi	ochemistry Practical	Ph	siology Practical	Ph	ysiology SGD		Bioche	mistry SGD		
(Biocher	nistry and	Physiology)	<ul><li>laboratory (Dr. Sadia Baqir)</li><li>(Biochemistry Practical) Lipid</li></ul>		Batch	Teacher Name	Batch	Teacher Name	IOH A Ba	tch Teacher Name	Batch	Teacher Name	V HOL	Batch	Teacher Name		
Sr. No	Batch	Roll No.	Solubility & Acrolein test	Monday	С	y	В	Dr. Rahat	d þ	E Dr. Kamil	Α	Dr. Aneela	] h	D	Dr. Uzma		
1.	А	01-70	(Physiology Practical)	Tuesday	D	d b	С	Dr. Nayab	ised	A Dr. Aneela	В	Dr. Shazia	ise	E	Dr. Almas		
2.	В	71-140	Determination of field of vision Venue – Physiology Lab	Wednesday	E	ervise HOD	D	Dr. Uzma	nperv	3 Dr. Shazia	C	Dr. Nayab	uperv	A	Dr. Romessa		
3.	С	141-210		Thursday	В	dng	Α	Dr. Almas	$\mathbf{x}$	D Dr. Iqra	E	Dr. Iqra	<i>S</i>	° C	Dr. Nayab		
4.	D	211-280		Saturday	А	•1	E	Dr. Romessa		C Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat		
5.	E	281-onwards	Topics for SGDs / CBL with Venue		Т	able No. 2	Batch Dis	stribution and Ve	nues for Anat	omy Small Group	Disscussi	ionSGDs / Dissecti	ons				
			Anatomy CBL: Middle Cerebral	Batches	Ro	ll No	Anat	tomy Teacher	r Venue								
			Artery Stroke	Α	01	1-90	Dr. Ga	uiti Ara	New Lectur	e Hall Complex #	01						
			Physiology SGD: Basal Ganglia &	В	91	-180	Dr. M	inahil Haq	New Lectur	e Hall Complex #	04	Supervised by Pr	rof. I	Dr. Ayesh	a Yousaf		
			limbic system (Venue: Lecture Hall No	С	181	1-270	Dr. Ta	riq Furqan	Anatomy Le	cture Hall 04							
			5)	D 271 onwards					Anatomy Le	cture Hall 03							
			• Biochemistry SGD: Ketone body	Biochemistry SGD: Ketone body													
			metabolism (Venue: Lecture Hall No 2)		~ ~												
Se No	Databas	Doll No	Table No. 3 Batch I	Distribution with	Venues ar	nd Teacher	s Name fo	Problem Based	Learning (PF	L) Sessions		Taac	ala and				
<u>51 NO.</u> 1		(01.35)	Lacture Hall no 05 Physiology Dr.	Sono Lotif (Dom	onstrator	51 NO. 1		(176.210)	Locturo Hol	ro 04	Dr. No.	vah Zonish (PGT P	byoi				
1.	AI	(01-33)	Bio	Salla Latli (Delli Shemistry)	011511 at 01	0.	C2	(170-210)	(Basement)	110.04	DI. Na	yau Zullisli (FUT F	11951	ology)			
2	Δ2	(36-70)	Lecture Hall # 04 (1st Floor Dr	Farah		7	D1	(210-245)	Lecture Hal	no 02	Dr Iar	a Avub (PGT Physi	ioloc	v)			
2.			Anatomy) (Der Phy	monstrator of siology)				(210 210)	(Basement)	10102				537			
3.	B1	(71-105)	Anatomy Museum (First Floor Dr.	Rohina Khalid		8.	D2	(246-280)	Conference Room Dr. Muhammad Usman								
1			Anatomy) (De	monstrator Biocl	nemistry)				(Basement)		(PGT F	Physiology)					
4.	B2	(106-140)	Lecture Hall no.03 (First Floor) Dr. (Ser Ana	Sadia Baqir nior Demonstrato tomy)	or of	9.	E1	(281-315)	New Lectury	e Hall no.01	Dr. Ra	amsha (PGT Physio	ology	7)			
	C1	(141-175)	Lecture Hall no.05 (Basement) Dr. Phy	Ali Zain (PGT siology)		10	E2	(315 onwards)	Lecture Hal	no.04	Dr. Jaw (Demo	vad Hassan nstrator Physiology	7)				
5.			No PBL during this week								(Demo:	instructor r injenetogy	/				
5.				Table No. 6 Venues for Large Group Interactive Session (LGIS)													
5.			Table No.	6 Venues for La	arge Group												
5.			Table No. Odd Roll Number	6 Venues for La	rge Group	all Comple	ex Lecture	Theater # 01									
5.			Table No. Odd Roll Number Even Roll Number	6 Venues for LarsNewrNew	rge Group Lecture H Lecture H	all Comple	ex Lecture	Theater # 01 Theater # 04									
5.			Table No. Odd Roll Number Even Roll Number	6 Venues for LarsNewerNew	Lecture H Lecture H Lecture H	all Comple	ex Lecture ex Lecture	Theater # 01 Theater # 04									
5.			Table No. Odd Roll Number Even Roll Number	6 Venues for La rs New r New	Lecture H Lecture H Lecture H	all Comple	ex Lecture	Theater # 01 Theater # 04									
5.			Table No. Odd Roll Number Even Roll Number	6 Venues for La rs New er New	<u>Lecture H</u> Lecture H	all Comple	ex Lecture	Theater # 01 Theater # 04									

### Schedule for LMS Based Weekly Online Assessments for Second Year MBBS (CNS Module) Batch 50

Class	Module	Day & Date	Time of	Focal person	Department
			Assessment		Responsible
		Monday 05 <sup>th</sup> August,2024	9:00 pm-9:30pm	Prof. Dr Ayesha Yousaf	Anatomy
		Tuesday 06 <sup>th</sup> August,2024	9:00 pm-9:30pm	Prof. Dr Samia Sarwar	Physiology
		Wednesday 07 <sup>th</sup> August, 2024	9:00 pm-9:30pm	Dr Aneela Jamil	Biochemistry
		Monday 12 <sup>th</sup> August,2024	9:00 pm-9:30pm	Prof. Dr Ayesha Yousaf	Anatomy
Second Year MBBS	CNS Module	Tuesday 13 <sup>th</sup> August, 2024	9:00 pm-9:30pm	Prof. Dr Samia Sarwar	Physiology
		Thursday 15 <sup>th</sup> August,2024	9:00 pm-9:30pm	Dr Aneela Jamil	Biochemistry
		Monday 19 <sup>th</sup> August,2024	9:00 pm-9:30pm	Prof. Dr Ayesha Yousaf	Anatomy
		Tuesday 20 <sup>th</sup> August,2024	9:00 pm-9:30pm	Prof. Dr Samia Sarwar	Physiology
		Wednesday 21 <sup>st</sup> August,2024	9:00 pm-9:30pm	Dr Aneela Jamil	Biochemistry

The online assessment for CNS Module for Second Year MBBS will be as per following schedule:

## Second Year Timetable for CNS Module (Sixth Week) (02-09-2024 to 07-09-2024)

Date / Day	8:00 AM - 9:00 AM	12:00-02:00pm
02-09-2024 Monday		
03-09-2024 Tuesday		
04-09-2024 Wednesday		Assessment Week
05-09-2024 Thursday		
06-09-2024 Friday		
07-09-2024 Saturday		

Note: Detailed notice regarding content, time and venue will be issued accordingly

Note: Timetable Subject to change according to the current circumstances.

## **SECTION-VII**

## Table of Specification (TOS) For CNS Module Examination

Blue Print of Assessment for First Year & Second Year MBBS

Table of Specification

Tools of Asssessment: Cognitive: MCQ- Multiple Choice Questions, EMQs- Extended Matching Questions, SAQ- Short Answer Questions, SEQ- Short Essay Questions Psychomotor: AvOSPE- Audio Visual Assisted Objective Structured Pactical Examination, labOSPE- Laboratory Based Objective Structured Practical Examination, IOSPE- Integrated Objective Structured Practical Examination, COSPE- Clinically Oriented Objective Structured Practical Examination Affect: AED Reflective Writing- Artificial Intelligence, Entraprenureship, Digital Literacy based reflective writing, OSVE- Objective Structured Viva Assessment

								Domair	s: C-Core	Subje	ect (70%	) Levels	; C1-C2,	HV- Horiz	ontal &	Vertica	Integ	ration (2	20%) Levels	C2-C3, S-	- Spira	al Integ	ration (	10%) Lev	els C2-C3							
									Th	eory	Cogniti	ve) Ass	essment	t											Practical	(Skill & Attitu	ıde) Assessı	ment				
End of Module Assessment	Subject	СНИ	M	ICQs	Mark		EM	IQs Marks		Тн	SAQs	Tota	Marks	·	SEC	)s	Tota	Marks	Total Marks Theory	Total Time	6	4 HV S	V OSPE	Marks	Time	AED Reflective Writing	Viva	OSVE	Total	Total Practical Marks	Grand Total	Total Time of Module Assessment
	Anatomy	19 4	2	25	25	, (	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
First Module	Physiology	19 4	2	25	25	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
	Biochemistry	19 4	2	25	25	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
Formative- Wee	kly LMS Based Assess	ment of 30	) MCQ	s (10 M	CQs per	Subjec	t)																									
									Th	eory	(Cogniti	ve) Ass	essment	t					_						Practical	(Skill & Attitu	ıde) Assessı	ment				Total Time of
End of Module Assessment	Subject		M	ICQs			EM	IQs			SAQs				SEC	)s		Marks	Total Marks	Total		1	V OSPE		Time	AED Reflective Writing		OSVE		Total Practical	Grand Total	Module
		C HV	/ S	Total	Mark	s C	Total	Marks	С	H	V S	Tota	Marks	С	HV	S	Tota	al	Theory	iime	С	HV S	Total	Marks			Viva	Сору	Total	Marks		Assessment
Second	Anatomy	19 4	2	25	25	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
Module	Physiology	19 4	2	25	25	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
Franklin Ma	Biochemistry	19 4	2	25	25	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	/	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
Block	Subjects	LMS C HV	Based M S	l Assess ICQs Total	sment Time	Li	abOSPE C	IOSPE HV	OSPE COSPE S	Tot	al Mark	s Time	Gran d Total	Total Bloc Time	:k								Sul No o	W ojects f MCQs*	eekly LMS Anatomy 30	Assessment Physiology 30	30	r				
	Anatomy	21	63	30	30 mi	n	14	4	1	2 2	0 60	6 HR	<u>6</u> 90	6.5 HRS									Mar	ks/MCQ	30	30	30					
BLOCK	Physiology	21	63	30	30 mi	n	14	4	•	2 2	0 60	6 HR	5 90	6.5 HRS	-									•MC0	=1 Mark e	each, 1 min ea	ch					
	50% Quest	ions/OSP	0 3 FStati	30 ons/Viv	30 mil	n ns will	14 he from	Foundation	Module ar	2 2 pd 509	6 Ouesti	ons will	be from	MSK-1 Mc	dule				1													
	Jone Quest	5	C state		a Statio			le d'al de com	Thousand and	10 50/	d Durat		DC HOM	100-1100	Aute				-													
Marks per		For	Each a	ssessm	ent stud	ient wi	li nave to	Individuali	y pass Theo	ory an	d Practi	ai comp	onents						]													
Item			-										0.005		-																	
	MCQ=1	EMQ:	= 5	tudent	SAQ= 5	-		SEQ= 9		AV	OSPE= 5		OSPE=	= 3																		
	USPE TIME	3 Round	of 40 5	tudent	s = 80 mi s = 240 n	n nin			4																							
		J Nouna	01 40 3	luuem	3-2401				-																							
	OSVE	=Time pe	r stude	ent=5m	ins																											
																														12	6   P a	age

# Table of Specification for Integrated OSPE

	Anatomy				
Sr. #	Topics	Knowledge	Skill	Attitude	Marks
Block II – Reprod	uction & CNS				
1	Development of Reproductive System				3
2	Development of Nervous System				3
3	Microscopic anatomy of Reproductive				3
	System	30%	50%	20%	
5	Microscopic anatomy of Nervous System				3
	Physiology				
1	Examination of sensory system				3
2	Examination of motor system				3
3	Examination of cerebellar functions	30%	50%	20%	3
4	Examination of cranial nerves				3
5	Performance of pregnancy test				3
6	Practical note book / sketch copy				3
	Biochemistry	7			
1	Quantitative estimation of Serum Uric	100%			2
	Acid				
2	Quantitative estimation of Serum				
	Cholesterol				
3	Quantitative estimation of Serum HDL	100%	90%	10%	2
	Cholesterol				
4	Quantitative estimation of Serum LDL				
	Cholesterol				
5	Quantitative estimation of Serum	100%	80%	20%	2
	Triglycerides (TAG)				
6	Practical notebook				

# Table of Specification for Gross Anatomy OSPE

<b>Sr.</b> #	Topics	Knowledge	Skill	Attitude	Marks
Block	II- Pelvis and CNS				
1	Bones of pelvis				3
2	Structures of Male pelvis				3
3	Structures of Female pelvis				3
4	External genitalia	30%	50%	20%	3
5	Radiology of Pelvis				3
6	Meninges				3
7	Brain Stem and cerebellum				3
8	Diencephalon and telencephalon				3
9	Cranial fossae				3
10	Radiology of Skull (cranial fossae)				3

Annexure I

(Sample MCQ, SAQ, SEQ Papers, AV OSPE, OSPE)

Note: These sample papers aim to facilitate comprehension. However, it's important to note that the content and format of actual assessment papers may differ.

#### RAWALPINDI MEDICAL UNIVERSITY, RWP ANATOMY DEPARTMENT 2<sup>nd</sup> Year MBBS Module Exam (CNS)

- 1. A patient was unable to maintain his balance with feet & heel close together. He was also unable to detect sensations of vibration when vibrating tuning fork was placed on joints of lower limb. Which of the following spinal cord tract is likely to be effected?
  - a. Rubrospinal
  - b. Corticospinal
  - c. Fasciculus gracilis
  - d. Fasciculus cuneatus
  - e. Lateral spinothalamic
- 3. A 75-year-old female suffered a stroke that produced loss of pain and temperature sensations from the left side of her face (along her forehead, cheek, and jaw). She had no other sensory or motor losses. Her physician advised MRI of brain to rule out the cause. Which structure is most likely to be suffered?
  - a. Left medial lemniscus
  - b. Right spinal trigeminal nucleus
  - c. Left spinothalamic tract
  - d. Right spinothalamic tract
  - e. Left spinal trigeminal nucleus
- 5. Internal capsule is a white matter structure situated in each cerebral hemisphere. Which one of the following passes through the sub lentiform part of internal capsule?
  - a. Optic Radiation
  - b. Auditory Radiation
  - c. Temporopontine fibres
  - d. Anterior Thalamic radiation
  - e. Corticonuclear fibres

#### Note: MCQs on USMLE Pattern

- 2. A diagnosed case of hypertension presented with weakness of left lower limb and difficulty in movements. On examination he also had impaired sensations of two point discrimination and vibration. On protrusion of the tongue it deviated to right side. Depending on the knowledge of Neuroanatomy which part is affected?
  - a. Midbrain
  - b. Pons
  - c. Medulla oblongata
  - d. Cerebellum
  - e. Hypothalamus
- 4. Computed tomography (CT) scan showed an area of hemorrhage in the region of the calcarine fissure. To determine the most likely neurologic deficit produced by this hematoma, which test should be performed?
  - a. Rapid independent finger movements
  - b. Visual fields
  - c. Cognitive functions in word definition
  - d. Tongue movements
  - e. Muscle tone and coordination

## RAWALPINDI MEDICAL UNIVERSITY CNS MODULE EXAM 2<sup>ND</sup> YEAR MBBS ANATOMY SEQS

#### Note: Attempt all questions. All questions carry equal marks. Draw diagram where necessary

a. A 45-year-old man was brought to OPD. His family explained that he had been experiencing progressive weakness and difficulty in walking. They also mentioned that he had a respiratory infection a few weeks ago. After examination and tests he was diagnosed as a case of Guillain Barre Syndrome affecting peripheral nervous system. Draw the histological section of structure affected in this condition.
 b. Enlist the cells present in different layers of cerebrum.
 c. Enumerate nuclei of cerebrum
 d.1
 a. Tabulate the adult derivatives from walls and cavities of primary and secondary brain vesicles.
 b. A 25-year-old male, presented with intractable headache, dizziness, and coordination difficulties. MRI confirmed cerebellar tonsillar herniation due to congenital malformation. Describe its embryological basis? What complication can arise in this case?
 c. What is Lateral Lemniscus

### RAWALPINDI MEDICAL UNIVERSITY CNS MODULE 2<sup>ND</sup> YEAR MBBS PHYSIOLOGY MCQS

- 1. Neurotransmitter concerned with slow chronic pain is:
  - a. glutamate
  - b. acetyl choline
  - c. GABA
  - d. substance P
  - e. calcitonin gene-related peptide
- 3. A 62-year-old male is evaluated by a neurologist after a stroke. The doctor observed defect in sequencing & coordination of motor activities. The organ damaged is:
  - a. Cerebellum
  - b. Medulla
  - c. Cortical motor strip
  - d. Pons
  - e. Eighth cranial nerve

#### Note: MCQs on USMLE Pattern

5. When the awake person's attention is directed to some specific type of mental activity, the alpha waves in EEG are replaced by:

- a. Theta waves
- b. Delta waves
- c. Beta waves
- d. Gamma waves
- e. Epsilon waves

- 2. The movement that is integrated at spinal cord level is:
  - a. Turning of head
  - b. Turning of eyes
  - c. Walking
  - d. Writing
  - e. Jumping

4. When the awake person's attention is directed to some specific type of mental activity, the alpha waves in EEG are replaced by:

- a. Theta waves
- b. Delta waves
- c. Beta waves
- d. Gamma waves
- e. Epsilon waves

## RAWALPINDI MEDICAL UNIVERSITY CNS MODULE 2<sup>ND</sup> YEAR MBBS ANATOMY EMQs

#### **Options:**

A. Ischemic stroke

B. Hemorrhagic stroke

C. Transient ischemic attack (TIA)

D. Subarachnoid hemorrhage

E. Lacunar infarct

- F. Thrombolytic therapy
- G. Carotid endarterectomy
- H. Antiplatelet therapy

I. Anticoagulation therapy

J. Intracerebral hemorrhage

#### **Questions:**

1. A 70-year-old male presents with sudden onset of right-sided weakness and slurred speech. His symptoms started two hours ago. He has a history of hypertension and diabetes. CT scan shows no hemorrhage.

What is the most likely diagnosis?

2. A 60-year-old female experiences a sudden severe headache described as "the worst headache of her life," followed by loss of consciousness. On examination, she has neck stiffness and photophobia.

What is the most likely diagnosis?

3. A 55-year-old male has a history of atrial fibrillation and presents with a sudden onset of left-sided weakness. Imaging shows a clot in the middle cerebral artery.

Which treatment is most appropriate if he arrived within 3 hours of symptom onset?

4. A 65-year-old female with a history of multiple TIAs presents with transient right-sided weakness and speech difficulties that resolved within 15 minutes.

What is the most appropriate initial treatment to prevent future events?

5. A 75-year-old male presents with progressive numbress and weakness on the right side of his body over several days. CT scan reveals a small, deep infarct in the brain.

What is the most likely diagnosis?

**Answers:** 

- 1. A. Ischemic stroke
- 2. **D. Subarachnoid hemorrhage**
- 3. **F. Thrombolytic therapy**
- 4. **H. Antiplatelet therapy**
- 5. E. Lacunar infarct

## RAWALPINDI MEDICAL UNIVERSITY CNS MODULE 2<sup>ND</sup> YEAR MBBS PHYSIOLOGY SEQS

Q.1	a) Compare dorsal column medial leminiscal system and antrolateral system for transmission of sensory nervous system?	(3)
	b) What is Stretch reflex	(1)
	c) Describe the role of golgi tendon organ in inverse stretch reflex.	(2)
Q.2	. a) Give the physiological basis of sleep.	(2)
	b) What is turn on and turn off phenomenon.	(1)
	c) Why knee jerk becomes pendular in lesion of cerebellum.	(2)

#### RAWALPINDI MEDICAL UNIVERSITY DEPARTMENT OF BIOCHEMISTRY 2<sup>ND</sup> YEAR MBBS CNS MODULE

1. Oxidation of fatty acid decrease in:

- a. Starvation
- b. Diabetes mellitus
- c. Decreased intake of carbohydrate in diet
- d. Well fed state
- e. Excessive carnitine
- 3.Inherited defect in enzymes of  $\beta$  oxidation cause:
  - a. Hyperglycemia
  - b. Ketoacidosis
  - c. Hypoglycemia
  - d. Fatty liver
  - e. Methylmalonic aciduria

#### 2. 3- hydroxybutyrate:

- a. Synthesis is increased after high carbohydrate diet
- b. Synthesis is dependent on NADPH
- c. Is increased in ketoacidosis
- d. Is mainly excreted from lungs during respiration
- e. Is directly converted to acetone.
- 4. A 55-year-old male patient presents with elevated cholesterol levels. Laboratory tests reveal increased LDL cholesterol and total cholesterol levels. Which of the following enzymes is primarily responsible for the regulation of cholesterol synthesis?
  - A. HMG-CoA reductase
  - B. Acetyl-CoA carboxylase
  - C. Fatty acid synthase
  - D. Lipoprotein lipase
  - E. Phosphatidate phosphatase
  - Note: MCQs on USMLE Pattern

#### <u>SEQ</u>

- Q. a. Describe the metabolism of chylomicrons. (02)
  - b. Discuss causes of carnitine deficiency. (02)
  - c. What is systemic primary carnitine deficiency syndrome. (01)

### RAWALPINDI MEDICAL UNIVERSITY DEPARTMENT OF BIOETHICS 2<sup>ND</sup> YEAR MBBS CNS MODULE

1Includes rules of conduct that may be used to regulate our activities concerning	2. The right of patients having self-decision is called.
the biological world.	a. Justice
a. Bio-piracy	b. Autonomy
b. Biosafety	c. Beneficence
c. Bioethics	d. Veracity
d. Bio-patents	e. Fidelity
e. Bio-logistic	
3. Following is not code of ethics.	4in the context of medical ethics, if it's fair and balanced
a. Integrity	a. Justice
b. Objectivity	b. Autonomy
c. Confidentiality	c. Beneficence
d. Behavior	d. Veracity
e. Autonomy	e. Fidelity
5Principle requiring that physicians provide, positive benefits	
a. Justice	
b. Autonomy	
c. Beneficence	
d. Veracity	
e. Fidelity	

#### RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI DEPARTMENT OF ANATOMY <u>2<sup>nd</sup> Year MBBS OSPE Block-II</u>

Station No. 1

Time Allowed: 2 Min

Histology sketch copy will be assessed for

a.	Complete index	(1)	
b.	Complete and signed diagrams	(1)	
c.	2 ID points mentioned with each diagram	(1)	
d.	Punctuality (		
e.	Neatness	(1)	
<u>Statio</u>	<b>n No. 2</b> Time Allowed: 2 Min		
a.	Identify Red	(1)	
b.	Identify Yellow	(1)	
c.	Identify Green	(1)	
d.	Look at the picture given below and answer the following questions		

IV a. What is this examination called?(1)b. Which structure is examined by this technique?(1)



#### RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI DEPARTMENT OF PHYSIOLOGY <u>2<sup>nd</sup> Year MBBS OSPE Block-II</u>

<u>Station No.</u>		Time Allowed: 2 Minutes	
MRI	of a j	patient suggests thrombosis of superior cerebellar artery,	
	a.	Enlist some signs & symptoms exhibited.	(2)
	b.	Will he experience any motor deficit?	(0.5)
	c.	Grade his reflexes	(0.5)
<u>Station No.</u>		Time Allowed: 2 Minutes	
	a.	Which cranial nerve assessed with the given instrument.	(0.5)
	b.	Give afferent & efferent of gag reflex.	(0.5)
	c.	How will you assess XII nerve?	(2)

#### RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI DEPARTMENT OF BIOCHEMISTRY 2<sup>nd</sup> Year MBBS OSPE Block-II

Station No. 1

Time Allowed: 2 Mins

#### **Observed Station**

Pipette out 100 microliters from given solution 03

Station No. 2

Time Allowed: 2 Mins

#### **Observed Station**

Observe the slide under the microscope. Give one identifying feature. 03

#### AV OSPE DEPARTMENT OF ANATOMY

Slide 1

Total Marks: 05 marks

Time Allotted: 05 minutes

Requirements: Answer sheet, Pen

### Objectives: \_\_\_\_

Slide 1

I. Identify Structure

"A"

"В"

- "C" (3)
- II. Name the procedure (1)
- III. What is it used for? (1)

#### Keys Slide 1

I. A-Anterior Lobe of Prostate B- Cut and ligated Vas Deferens (2)

II. Vasectomy (1)

III. Male sterilization (1)

IV. Yes in most cases (1)





#### Slide 2

Total Marks: 05 marks

**Time Allotted:** 05 minutes

Requirements: Answer sheet, Pen

#### Objectives: \_\_\_\_\_

Slide 2

- I. Identify the structures
  - A-
  - В
  - С
  - D
- II. Name the clinical condition affecting A



Slide 2

- I. A-Amygdala
- B- Body of Fornix
- C- Mamillary Bodies
- D-Anterior Nucleus of thalamus
- II. Klüver-Bucy syndrome



### AV OSPE DEPARTMENT OF BIOCHEMISTRY

Slide 1

Total Marks: 05 marks

**Time Allotted:** 05 minutes

Requirements: Answer sheet, Pen

Objectives: \_\_\_\_\_



- A 46 years male presented in ER with severe chest pain associated with nausea and sweating. Laboratory examination showed raised plasma cholesterol level.
- Q1. What is the normal plasma cholesterol level? (01)
- $Q^2$ . Write the causes of hypercholesterolemia. (01)
- Q3. Which drugs can be used to lower plasma cholesterol level? (01)

Q4. Give the difference between LDL (low-density lipoprotein) and HDL (high-density lipoprotein). (01)

Q5. What is Bad Cholesterol. (01)